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An Exploration of the Nature of Contemporary Adolescents' Intimate Relationships

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Thesis presented for the Degree of

DOCTOR OF PHILOSOPHY



In the Department of Psychiatry and Mental Health
Health Sciences Faculty
UNIVERSITY OF CAPE TOWN

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This thesis is dedicated to the late Professor Alan Flisher
who inspired me to return to South Africa
and dedicate my work to public mental health
research and development.

University of Cape Town

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DECLARATION

This thesis is presented in fulfilment of the requirements for the degree of Doctor of Philosophy (PhD) in the Department of Psychiatry and Mental Health at the University of Cape Town. The work on which this thesis is based on original research and neither the whole work nor any part of it has been, is being, or is to be submitted for another degree in this or any other university. The contents of this doctoral thesis are entirely the work of the candidate under the supervision of Associate Professor Cathy Mathews, Professor Rachel Jewkes, and, in part, the late Professor Alan Flisher. Three published, peer-reviewed journal articles and one published, peer-reviewed book chapter included in this thesis are directly based on research fulfilling the objectives of the research study for this degree as described in the Preface of this thesis. These works were co-authored by the candidate, supervisors, and research project team members; the role of each author for each paper is described at the introduction of each chapter (2-5) in this thesis.

Signed by candidate

Signature:

Date: 13 May 2013

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I could not have travelled this journey without the unfailing support, guidance, and encouragement of many people who I wish to acknowledge here.

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Thank you all.

PREFACE

This doctoral thesis includes work presented in peer-reviewed publications as per general provision 6.7 in the General Rules for the Degree of Doctor of Philosophy (PhD) of the University of Cape Town. The submission of the thesis in this format was approved by the Professor Danie Visser on 22 January 2013. The publications included in this thesis all relate directly to the thesis topic, and contribute to answering the aims and objectives of the study.

The following publications are included in this thesis:

<i>Thesis chapter</i>	<i>Publication citation</i>
Chapter 2	Gevers, A. & Flisher, A.J. (2012). School-based youth violence prevention interventions. School-based youth violence prevention interventions. In Ward, C., van der Merwe, A., & Dawes, A. (Eds) <i>Youth Violence: Sources and Solutions in South Africa</i> . Cape Town, South Africa: UCT Press All chapters for this volume were peer-reviewed.
Chapter 3	Gevers, A., Jewkes, R., Mathews, C., & Flisher, A. (2012). 'I think it's about experience, like, life': A qualitative exploration of contemporary adolescent intimate relationships in South Africa. <i>Culture, Health & Sexuality</i> , 14(10), 1125-1137.
Chapter 4	Gevers, A., Jewkes, R., & Mathews, C. (In press). What do young people think makes their relationships good? Factors associated with assessments of dating relationships in South Africa. <i>Culture, Health, and Sexuality</i> .
Chapter 5	Gevers, A., Mathews, C., Cupp, P., Russell, M., & Jewkes, R. (Revision submitted) Illegal yet developmentally normative: A descriptive analysis of young, urban adolescents' dating and sexual behaviour in Cape Town, South Africa. Current status: Revisions submitted to <i>BMC International Health and Human Rights</i>

I am the lead author on all published papers included in this thesis and my supervisors are listed as co-authors on these papers because of their contributions to them; this is the common practice in health sciences publications. For the publication included here as chapter five, two additional co-authors are included because they were co-investigators on the larger project from which the data were extracted and they

provided reviews of advanced drafts of the paper before submission for publication. A preface to each chapter will describe the candidate and each co-author's roles in the publication. Each publication conforms to the style required by the respective journal and book and are presented in these formats within this thesis. The reference style for chapters 1 and 6 of this thesis are in a consistent APA format. References are included at the end of each thesis chapter.

Supervision of this study

Professor Alan Flisher provided supervision from the beginning of the thesis work in 2008 until his untimely death in April 2010. Associate Professor Cathy Mathews provided supervision throughout the thesis work (2008 – 2013). Professor Rachel Jewkes began supervising my thesis work in April 2010 and has continued to its conclusion.

The three supervisors' ensured that the conceptualisation and methodology of the overall thesis and each individual chapter was sound and that the papers were written clearly and were academically appropriate. I discussed my concept for the thesis and each chapter and the data analysis for each chapter with my supervisors. I drafted each paper in full before submitting the draft to my supervisors for their review. All revisions resulting from their review and the peer review processes for publication were made by me. The supervisors also approved the final draft of each manuscript before submission for peer reviewed publication.

ABSTRACT

Intimate relationships in adolescence play an important role in psychosocial development and can impact on relationships during adulthood. There is a need for evidence-based interventions to prevent intimate partner violence (IPV), promote sexual and reproductive health, and equitable, enjoyable relationships during adolescence. A nuanced understanding of contemporary adolescents' intimate relationships is needed to inform intervention development.

A series of studies was undertaken to explore (a) contemporary adolescents' ideas about and experiences of relationships; (b) young adolescents' sexual behaviour and dating; (c) adolescents' conceptions of a good relationship; and (d) published-evidence guidelines for developing school-based violence prevention interventions. For study (a), qualitative data were collected during focus group discussions and in-depth interviews with 14-18 year olds. Survey data from 13-16 year olds (for study b) and 15-18 year olds (for study c) were analysed using regression analyses.

Adolescents' intimate relationships are fluid and unstructured, highly gendered, and greatly influenced by peer relationships; however, experience with relationships and sex are varied. For girls, good relationships were associated with having a mutual main partnership with an older, educated boyfriend in which there was good, open communication particularly about sexual and reproductive health. For boys, a mutual main partnership and very little quarrelling were associated with good relationships. Young adolescents' reported engaging in a variety of sexual behaviours ranging from kissing to sexual intercourse with the former more common than the latter.

These findings indicate a need for early interventions that are carefully adapted and acceptable to adolescents who have varying levels of experience with relationships, sex, and violence. Adolescents would benefit from developing gender equitable attitudes; critically reflecting on their ideas and practices related to good and poor relationships; building sexual decision-making skills to better prepare them to develop

and maintain good, healthy relationships and end poor or abusive ones. Interventions should incorporate adolescents' perspectives and balance evidence-based best practice and resource availability.

CHAPTER 1

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CHAPTER 1

Introduction and Literature Review

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Introduction

Adolescence is a time of immense change during which youth individuate and develop a mature and unique self-concept. Adolescents experience significant biological, cognitive, social and psychological changes as well as face new and increasing sociocultural demands that require individuals to take on new roles in various domains. The choices made and experiences faced during adolescence can have a long-term impact as individuals make the transition into adulthood (Collins, 2003; Natsuaki, Biehl, & Ge, 2009; Sorenson, 2007; Zimmer-Gembeck, Siebenbruner, & Collins, 2001). Although adolescents have to navigate their way through a myriad of risk factors during this developmental period, it is also an exciting time and affords many opportunities for positive growth.

During childhood the social sphere is usually limited to family and school interactions with families being the primary socialisation agents during this time. During adolescence, the social sphere is expanded and peer relationships become more intense and peers become very influential and important socialisation agents. As such, peers impact an adolescent's self-concept, behaviour, and other choices in various life domains (Galliher, Welsh, Rostosky, & Kawaguchi, 2004; Pipher, 1995). Peer relationships in adolescence can be a protective or a risk factor; that is, a peer group could enrich an adolescent's quality of life through mutual support, or, through competitive behaviour, teasing, and peer pressure, a peer group can lead an adolescent to engage in risky behaviours (Campbell & MacPhail, 2002; La Greca & Harrison, 2005; Maxwell, 2002; Selikow, Ahmed, Flisher, Mathews, & Mukoma, 2009).

One important type of adolescent relationship is the intimate or dating relationship. Such a relationship is similar to friendship in that it is an on-going interaction engaged in by two people who both acknowledge the relationship (Collins, 2003). The effects and expectations for intimate relationships as opposed to other close relationships with family and friends are distinct and this distinction is expressed by children as young as 9 years of age (Collins, 2003). Through intimate relationships, adolescents begin to explore unique emotional and physical intimacies and learn about caring and mutual dependence that is different from even very close platonic friendships (Collins, 2003; Galliher et al., 2004). The experiences impact on adolescents' functioning as well as long-term outcomes during adulthood (Collins, 2003; Galliher et al., 2004; Roisman, Booth-LaForce, Cauffman, & Spieker, 2009; Zimmer-Gembeck & Petherick, 2006). Teenagers report that dating relationships are important to them, but that they also often find them difficult to develop (Grover & Nangle, 2003).

Defining adolescent intimate relationships depends in part on understanding the nature of these relationships within the particular sociocultural contexts that influence the norms and practices of them. Throughout this thesis 'intimate relationships', 'dating relationships', and 'romantic relationships' are terms used interchangeably to refer to dyadic relationships in which the couple consider themselves to be partners or boyfriends and girlfriends even if they use other culturally equivalent labels. These relationships are distinct from friendships and would be considered as such by the couple, but they are not necessarily exclusive or sexual. Indeed, the common conflation of sexual activity and dating in much of the existing literature may compromise a nuanced understanding of intimate relationships particularly among younger teenagers who may be dating but not engaging in any sexual activity.

In Chapter 1, an introduction to adolescents' intimate relationships, I will argue that these relationships are developmentally normative and significant but note that the existing literature has several limits. These include the bias and lack of generalizability of the research literature that is primarily based on North American studies and the lack of differentiation of different age groups within the developmental spectrum of

adolescence. This thesis aims to contribute knowledge from South Africa to broaden the existing literature and to highlight differences and similarities between younger and older adolescents' ideas and experiences of their intimate relationships. The chapter provides a discussion of a systematic review of the peer-reviewed, published research literature on adolescents' intimate relationships. This literature review focuses specifically on local literature, but where necessary also draws on the global literature. The overview and critique of existing evidence discusses intimate partner violence, which is a predominant theme and particular concern within the global literature on teen dating relationships. This research indicates the need to intervention programmes that are relevant and appropriate within the local sociocultural context. A conceptual framework for this thesis focusing on the ultimate outcome of informing the development of appropriate and accessible intervention programmes is presented, followed by a critical literature review of relevant areas is discussed. These areas include evidence-based violence prevention interventions in school settings; adolescents' conceptualisations of dating relationships; adolescents' concepts of good intimate relationships; and adolescent sexual and reproductive health. Finally, the chapter closes with a description of the aim, objectives, and overview of the thesis.

A developmental perspective on adolescent intimate relationships

Although adolescence is recognised as a distinct developmental period, the definition or age limits of this period vary. The World Health Organisation identifies the period from 10 until 19 years of age as adolescence, but some adolescent research includes individuals ranging in age from 12 to 18 years and in some cases up to 22 years old. In this thesis I have focused on high school students and loosely considered an age range of 12 years (the age at which children in South Africa can consent to medical treatments and obtain contraceptives) to 18 years (legal age of majority in South Africa), even though some South African high schools have students older than 20 in their classes. Adolescents are not homogenous. This developmental period is one of rapid change and thus a young adolescent of 13 or 14 years old is significantly different from one of 17 or 18 years of age in physical and psychosocial maturity. Concurrently, norms for different developmental stages also change, as do expectations

and responsibilities of adolescents as they grow from children into adults. Although progression through key developmental tasks and changes is not strictly age-based, so individuals progress at different rates, we can be guided by general trends in developmental theory and research.

The goal of a developmentally-sensitive understanding of adolescent intimate relationships is not to obtain time-specific information, but to understand that the physical and psychosocial developmental progression and emerging competencies will impact on these relationships. Therefore, we could expect that what is typical during early adolescence is different from late adolescence. Further, what we may consider healthy or risky about these relationships may differ at different developmental periods. For example, sex among young teens (e.g., 14 year olds) may be considered high risk whereas it is more normative among older teens (e.g., 18 year olds) (Department of Health, Medical Research Council, & OrcMacro, 2007). Therefore, it is essential that researchers not treat adolescents as a homogenous group, but rather to take a developmentally-sensitive lens to examine data. Very few papers in the current body of literature present such a perspective. Often data for 12 and 13 year olds are analysed with those from 18 or 19 year olds, with the result that there is little scientific scrutiny of differences and similarities between these groups. In this thesis, I have noted when data are from younger teenagers (approximately 14 years old; Chapter 3 and 5) compared to older teenagers (approximately 17 years old; Chapter 3 and 4).

In addition, adolescent development is influenced by the sociocultural milieu in which they live. This milieu may determine normative and taboo practices as well as defining particular competencies at different developmental stages and these may impact on dating. For example, in some cultures, teenagers' involvement in dating relationships may be encouraged and accepted whereas in others it may be frowned upon during early adolescence but accepted with family involvement in older adolescence. These sociocultural influences are important to consider and in this thesis, particular views and practices of South African adolescents are explored and contrasted

with the North American and Western European perspectives that dominate the research literature.

A developmentally sensitive understanding must also take into account gender socialisation; indeed, Pipher (1995) argues that adolescence is a time of intensified gender socialisation. That is, individuals face increased social messaging and pressure to conform to particular constructions of being a man or being a woman. Gender is socially constructed through our attitudes about and performances of masculinities and femininities which impact on behaviour and interpersonal relations (Connell, 1987; Morrell, 2001; Connell & Messerschmidt, 2005; Hunter, 2005; Walker, 2005). Although multiple masculinities and femininities can exist, there are dominant or hegemonic forms that are idealised and privileged over others (Connell, 1987). In this thesis, gender refers to the dominant social constructions of masculinities and femininities.

Adolescents' involvement in intimate relationships

The research literature on adolescent intimate relationships is primarily from high income countries with a high concentration of research coming from North America. In comparison, relatively little is known about these relationships in low and middle income countries (LMICs). Nevertheless, in many cultures across the world, youth become involved in intimate relationships during the adolescent period (Carver, Joyner, & Udry, 2003; Ciairano, Bonino, Kliwer, Miceli, & Jackson, 2006; Collins, 2003; Daddis & Randolph, 2010; Flisher, Myer, Marais, Reddy, & Lombard, 2007; Florsheim, 2003; Sorenson, 2007) and at times experience difficulties within these relationships such as intimate partner violence (Bandyopadhyay, Deokar, & Omar, 2010; Dunkle et al., 2006; Flisher et al., 2007; Jewkes, Dunkle, et al., 2006; Jewkes, Dunkle, Nduna, & Shai, 2010), poor sexual and reproductive health outcomes (Abrahams et al., 2004; Jewkes et al., 2010; Jewkes, Vundule, Maforah, & Jordaan, 2001; Kaaya et al., 2002), or mental health problems (Collins, 2003; Jina et al., 2012; La Greca & Harrison, 2005; Nduna, Jewkes, Dunkle, Shai, & Colman, 2010; Welsh, Grello, & Harper, 2003). Although there may be broad similarities, the form these relationships take, how they are constituted, the motivations for getting involved in them, and how teenagers experience them may

be strongly influenced by the sociocultural context in different regions of the world. In this thesis, engagement with local research has been prioritised and links to the international body of literature have also been included to illustrate points of similarity and difference.

Researchers in the United States have found that between the ages of 12 and 18 years most adolescents become engaged in an intimate relationship (Collins, 2003; Sorenson, 2007). A cross-sectional study of adolescents in Grade 8 (typically 13-14 year olds) and Grade 11 (typically 16-17 year olds) in Cape Town found that 87% of respondents had been in or were currently in an intimate relationship (Flisher et al., 2007). These data support the developmental perspective that such relationships are normative. Further, these are also developmentally significant and highly influential in adolescents' lives; that is, both positive and negative relationship experiences during adolescence can have a lasting impact on individuals' lives especially in terms of developing relationship styles (Collins, 2003; Galliher et al., 2004; Giordano, Manning, & Longmore, 2006; Roisman et al., 2009). Longitudinal studies with Dutch teenagers have found that when adolescents are in an intimate relationship the relative influence of their parents and best friends decreases (Meeus, Branje, & Overbeek, 2004; Meeus, Branje, van der Valk, & de Wied, 2007). In addition, many adolescents report spending more time with their intimate partner than with their friends and family (Sorenson, 2007). We can conclude that intimate relationships and intimate partners are not only significant to teenagers' social development, but also influence their other personal relationships, behaviour, and choices.

Although romantic relationships can be exciting and enjoyable experiences for teenagers, they can present significant health and well-being challenges to young people. Sexually transmitted infections, pregnancy, mental health difficulties including labile mood, depression, anxiety, externalising behaviour problems, and eating disorders, drug and alcohol use, as well as an increase in a host of risk behaviours and a decline in school performance are some of the negative experiences that have been associated with adolescents' involvement in intimate or sexual relationships (Collins,

2003; Quatman, Sampson, Robinson, & Watson, 2001; Sorenson, 2007; van Dulmen, Goncy, Haydon, & Collins, 2008). These experiences have been variously linked with adolescents' involvement in intimate relationships in general and also specifically to unhealthy, particularly abusive, relationships. Some research suggests that adolescents are at increased risk, in comparison to other age groups, for being involved in dating violence and risky sexual behaviour within intimate relationships and they also seem to accept high levels of jealousy, sexual coercion, and generally unhealthy relationships (Sorenson, 2007).

Intimate partner violence among adolescents

Intimate partner violence is a predominant theme in the local and international adolescent relationship research literature; the discussion here focuses primarily on local research. According to the WHO definition, intimate partner violence is any emotional, physical, or sexual violence or abuse or controlling behaviour perpetrated by a current or previous intimate partner (WHO, 2005). In addition to the social and emotional trauma of experience partner violence, this violence increases adolescents risk of early sexual debut, multiple sexual partners, sexually transmitted infection and HIV, pregnancy, injury, and depression (Banyard & Cross, 2008; Eaton, Flisher, & Aaro, 2003; Jewkes et al., 2010; Nduna et al., 2010). Further, experiencing intimate partner violence during adolescence increases the likelihood of enduring such abuse in adult relationships as well as dealing with the residual effects of the numerous correlates listed above (Collins, 2003; Flisher et al., 2007).

Several studies have found that South African adolescents experience intimate partner violence and, although most of the data are aggregated across age, there is some evidence to suggest that this violence affects teenagers across the developmental spectrum. Among a sample of Cape Town high school students in grades 8 and 11, 20.7% of those who had ever been in an intimate relationship reported perpetrating physical violence against a partner (Flisher et al., 2007). Almost one tenth of young teenage girls (approximately 13 years old) reported experiencing physical abuse in dating relationships (Mathews et al., 2009). An even higher prevalence was found

among Johannesburg high school students aged 13 to 23 years, where 52.4% of girls and 49.8% of boys reported perpetration or victimisation of physical intimate partner violence (Swart, Seedat, Stevens, & Ricardo, 2002). Over a quarter of the boys reported that their violent behaviour had caused physical injury to their partner and nearly one fifth of girls reported sustaining injuries as a result of physical violence (Swart et al., 2002). Over 20% of older adolescent girls and over 14% of older adolescent boys attending high school (aged 15-26 years) in the rural Eastern Cape reported more than one physical or sexual intimate partner violence incident as a victim or perpetrator (Jewkes et al., 2008). There are alarming rates of sexual violence within adolescents' intimate relationships; indeed, only 30% of sexually experience young women reported that they really wanted their first sexual experience, compared to 83% of young men who report the same (Pettifor et al., 2004). Almost half (46%) of young women from KwaZulu Natal reported their first sexual encounter was coerced (Maharaj & Munthre, 2007). Fewer studies have investigated emotional abuse in intimate relationships in comparison to physical and sexual partner violence. Among older adolescent girls (approximately 18 years old), 14.6% reported experiencing only emotional intimate partner violence and 28.3% had experienced both emotional abuse and physical and/or sexual violence (Jina et al., 2012).

These data indicate that intimate partner violence of various forms are shaping relationship experiences of many teenagers from an early age. Research with teenagers in Cape Town and Johannesburg has found that this violence is associated with increased age, being sexually active, having multiple sexual partners, witnessing violence in friendship relationships, and the use of alcohol (Flisher et al., 2007; Swart et al., 2002). Teen victims of intimate partner violence have been found to experience significant mental health problems including depression, suicidal ideation, and substance use and these mental health challenges contribute to on-going abuse and sexual risks including sex with older partners, and transactional sex (Jina et al., 2012; Nduna et al., 2010). High levels of HIV risk behaviours such as having more sexual partners including casual sex partners, more frequent sex, substance use, raping a non-partner, and engaging in transactional sex have been associated with perpetrating

intimate partner violence (Jewkes, Dunkle, et al., 2006). Physical partner violence is also associated with the occurrence of sexual violence in the relationship (Jewkes, Dunkle, et al., 2006; Swart et al., 2002). Partner rape is additionally associated with engaging in transactional sex, having multiple sexual partners, and experiencing trauma during childhood (Jewkes, Dunkle, et al., 2006).

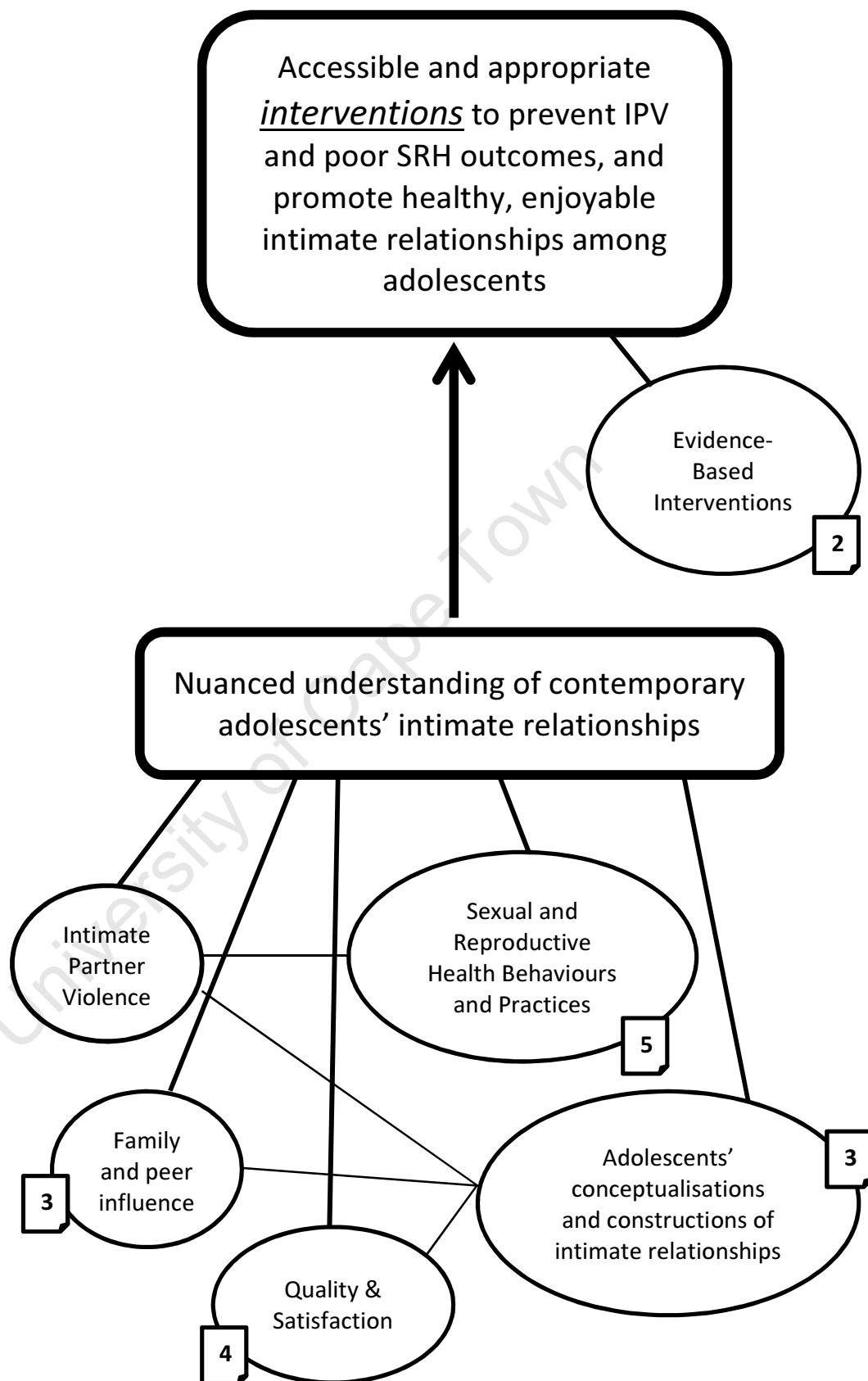
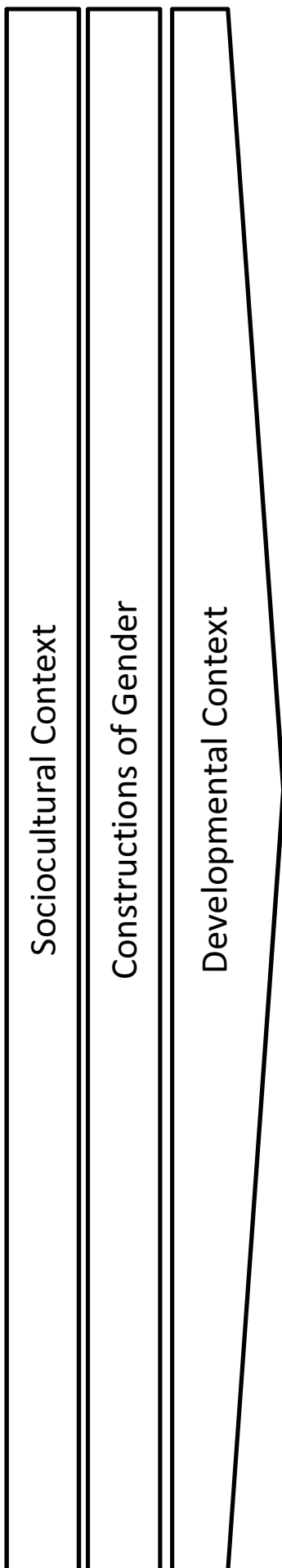
Based on research from a variety of high and low resource settings, Jewkes (2002) developed a theoretical model of the causes of intimate partner violence (primarily physical abuse), which is briefly described here. Gender inequality and a culture of violence are at the root of intimate partner violence and the manifestations of these cultural ideologies are exacerbated by poverty and problematic substance use (Jewkes, 2002). Gender inequalities manifest in socially constructed, hierarchical gender roles that privilege men over women supporting men's sexual entitlement and control of women and women's low social value and power (Jewkes, 2002). These inequalities are evident in low levels of economic access and power; family, social, and legal support; public participation and role availability; power in private arenas such as in the home and within relationships; and, educational attainment for women. Pressures to conform to expected, patriarchal gender roles and the overt and subtle punishments of any transgressions of these norms contribute to a greater likelihood of violence in relationships (Jewkes, 2002). In many cultures, violence is witnessed and experienced throughout society both outside and inside the home resulting in a consciousness that violence is usual in conflict. Therefore, when couples experience conflict in their relationship, a violent response is would be considered legitimate especially within the context of manifestations of gender inequality and heavy alcohol use (Jewkes, 2002). These research findings indicate an urgent need for intimate partner violence prevention interventions.

Conceptual framework

A conceptual framework for this thesis is illustrated in Figure 1 and described here. Research with contemporary South African adolescents has indicated the need for intimate partner violence prevention interventions specifically for this group. The

development of appropriate and acceptable interventions should first consider the use of existing evidence-based interventions that have been evaluated in similar settings. Second, such interventions must be informed by a nuanced understanding of contemporary adolescents' intimate relationships. Specific aspects contributing to this understanding include local teens' conceptualisations and constructions of these relationships; factors contributing to relationship quality and satisfaction; and, sexual and abusive behaviours within these relationships. This understanding and the interventions must take into account the influences of the sociocultural context (Barter, 2009; Harrison, 2002; Petersen, Bhana, & McKay, 2005), social constructions of gender, and the psychosocial developmental stage and tasks of adolescence.

This thesis will contribute knowledge to build a nuanced understanding of South African adolescents' romantic relationships particularly on the topics of school-based violence prevention intervention design (Chapter 2), adolescents' ideas and experiences of dating relationships (Chapter 3), their ideas about 'good' relationships (Chapter 4), and young teens' involvement in various sexual behaviours (Chapter 5). The influences and roles of the sociocultural context, gender, and developmental stages will be considered throughout the thesis. Peer-reviewed research from a systematic search in these relevant areas is critically reviewed here with a particular emphasis on local research.



School-based violence prevention interventions for adolescents in LMICs

In South Africa, most children and young adolescents attend school (at least until mid-high school level) (Department of Education, 2007; Flisher et al., 2000) and so school-based interventions have a high likelihood of reaching most youth especially early adolescents who are a prime group for primary prevention interventions. Although school-based interventions have shown some success internationally, research evaluations have found such intervention programmes in sub-Saharan Africa, have not yet been effective (Jewkes, 2010). Jewkes' (2002) theoretical model discussed earlier describes the contribution of broader normative use of violence to intimate partner violence and recommends the prevention of interpersonal violence broadly as an important aspect of partner violence prevention. Therefore, addressing other forms of interpersonal violence as well as intimate partner violence in prevention programmes for adolescents is important.

Examples of school-based violence prevention interventions with a strong evidence base supporting their effectiveness include Safe Dates (Foshee et al., 1998; Foshee et al., 2004; Foshee et al., 2005; Foshee et al., 2000), Fourth R (Wolfe et al., 2009), and the Olweus Bullying Prevention Program (Olweus, 2005). Safe Dates is an intimate partner violence prevention intervention developed and evaluated in the United States and includes classroom-based lessons for younger adolescents, extracurricular activities (a play and a poster competition), and informational material for teachers and parents (Foshee et al., 1998; Foshee et al., 1996). Fourth R is a broader relationships education program that includes intimate partner violence prevention and was developed and evaluated in Canada (Wolfe et al., 2009). This intervention includes lessons for younger adolescents and informational material for teachers and parents with suggestions for further community involvement and linking with relevant help resources. The Olweus Bully Prevention Programme was developed and evaluated in Norway (Olweus, 2005) and also evaluated in the United States (Limber, 2006). This program promotes a systems approach to create anti-bullying and pro-safety school environments by educating teachers about bullying, setting up school monitoring

policies and systems, clarifying school rules, implementing appropriate consequences for bullying incidents, facilitating classroom dialogues, and engaging with parents and community members.

Researchers familiar with youth violence and HIV prevention interventions in South Africa have written more broadly about characteristics of successful interventions in local contexts. These authors emphasise a participatory rather than didactic approach, focusing on building critical thinking and key behavioural skills (e.g. communication) rather than focusing on increasing knowledge, and addressing problematic ideologies such as gender inequalities and the culture of violence while building prosocial, equitable attitudes (Campbell & MacPhail, 2002; Jewkes, 2010; Jewkes, Morrell, & Christofides, 2009). The contrast between adolescents' knowledge of HIV transmission prevention and their risk behaviour (Department of Health et al., 2007) indicates that knowledge alone will not impact key behaviours targeted in interventions. The sociocultural context is an important factor in how it impacts on relationships, violence, and sexual health and there must be a good fit between the intervention and this context. Further, interventions may need to challenge and transform the sociocultural context so that it becomes supportive of healthier norms and beliefs (Campbell & MacPhail, 2002). Therefore, if interventions seek to empower individuals, the environment should support and help to maintain such empowerment (Campbell & MacPhail, 2002).

Despite the strong evidence supporting international school-based violence prevention interventions, their suitability in the South African context must be carefully considered particularly to ensure that the content and the approach are relevant within the local sociocultural milieu (Barter, 2009). In addition, and as noted above, it is important to take into account the interpersonal and broader sociocultural contexts within which adolescents live in order to ensure that participating adolescents can engage with material that is relevant and accessible. Given the gravity of violence in adolescents' lives, the scarcity of resources available to address this issue, and the lack of readily available evidence-based interventions for LMICs, an evidence-informed

guide for designing school-based interventions in low resource settings is needed. Therefore, this thesis critically reviews the literature available on school-based violence prevention interventions in order to produce such a guide for intervention developers (see Chapter 2).

Contemporary South African adolescents' concepts and experiences of intimate relationships

Although local research has shown that adolescents are engaging in dating relationships (Dunkle et al., 2006; Flisher et al., 2007; Harrison, Xaba, & Kunene, 2001; Harrison, Xaba, Kunene, & Ntuli, 2001; Jewkes & Morrell, 2012; Jewkes, Nduna, et al., 2006; Jewkes et al., 2001; Jewkes, Wood, & Duvvury, 2010), we know relatively little about how they negotiate, shape, and understand these relationships. Most of what we know is based on research with adolescents in North America and the portrayals that have been popularised through television and movies. Local research has primarily focused on adolescents' experiences of sex and violence. Therefore, we are left to deduce an understanding of dating in the South African context based on relationships in which teens are sexually active and/or experiencing intimate partner violence which does not represent the full spectrum of the kinds of intimate relationships that younger and older teenagers experience. The research findings described earlier indicate that many local adolescents do not have abusive relationships and do not have sexual intercourse with their partners.

Sexuality research with teenagers in KwaZulu Natal and Eastern Cape provinces of South Africa describe two typical types of adolescent intimate relationships; namely, serious and casual (Harrison, 2002, 2008; Jewkes & Morrell, 2012). In addition, these groups of adolescents also described a prevalence of multiple concurrent sexual partnerships (Harrison et al., 2001; Jewkes & Morrell, 2012). These relationships, no matter whether serious, casual, or one of many concurrent relationships, are characterised by traditional gender roles that casts boys in positions of power and leadership in a relationship and girls in more passive positions (Harrison et al., 2001; Harrison et al., 2001; Jewkes et al., 2010; MacPhail & Campbell, 2001). This gender

dynamic has been similarly found among younger adolescents in the United States (Noonan & Charles, 2009; O'Sullivan, 2005). As noted earlier, these gender constructs in dating relationships make teens vulnerable to intimate partner violence (Campbell & MacPhail, 2002; Jewkes, 2002). Further, with boys assuming the lead position in these relationships, most of the decision-making power, ranging from relationship initiation and definition to couple activities and sex, lies with them (Harrison et al., 2001; Harrison et al., 2001). Much of the HIV-focused research among youth has discussed the trend of multiple concurrent partnerships and adolescent girls dating older men. Older partners are likely to fulfil several of the characteristics older adolescent girls in the Eastern Cape described as desirable including maturity, wealth, sexual satisfaction, and the ability to be romantic (Jewkes & Morrell, 2012). Of concern is that many of these teenage women seemed willing to accept high levels of controlling and sometimes violent behaviour from their partners if they meet other desirable ideals (Jewkes & Morrell, 2012; Jewkes et al., 2010). A developmental perspective should inform how we evaluate age differences between partners during adolescence, particularly younger teens. That is, a two or three year age difference between a young teenager and her or his dating partner may be a very large developmental gap whereas for an older teenager there may be more developmental equity between such partners. Developmental inequity is likely to exacerbate the power inequities in teenagers' romantic relationships that increase the risk of poorer outcomes.

Further research is needed to build an understanding of a broader continuum of contemporary South African adolescents' concepts and experiences of intimate relationships, including those that may not be sexually active or abusive. Such an exploration will provide more nuanced insight into the relationship contexts in which violence or sexual risk-taking and healthier relationship behaviours may occur in different forms. Understanding adolescents' ideas about different facets of dating may link to factors that protect against or create vulnerabilities for problematic sexual or violent dynamics. Therefore, this thesis will explore the nature of younger and older South African adolescents' conceptualisations and practices of intimate relationships (see Chapter 3).

Adolescents' ideas about good dating relationships

Our understanding of positive aspects of intimate relationships during adolescence including psychosocial wellbeing, social skills, and relationship satisfaction is relatively underdeveloped in comparison to the available evidence-based knowledge on poor sexual and reproductive health, intimate partner violence, and mental health difficulties related to these relationships. Both the local and international research on contemporary adolescent intimate relationships has primarily focused on the issues that we aim to prevent in adolescent intimate relationships. But adolescent romantic relationships can also be enjoyable and supportive experiences that also help young people develop social competencies. Increased feelings of self-worth, social competence, prosocial interpersonal skills, and a positive intimate self-concept have been found to be linked with adolescent intimate relationships (Collins, 2003; Sorenson, 2007).

It is unclear what relationship factors predict these positive outcomes and what adolescents themselves judge to be positive. Few studies on relationship satisfaction or quality in the adolescent relationship literature could be found both locally and internationally. Examining adolescents' relationship satisfaction may contribute to an understanding of adolescents' choices and decisions within relationships particularly regarding the types of partners they may choose and the kinds of behaviour they may engage in with their partners.

Research in the United States has found that assessments of the satisfaction or quality – how subjectively 'good' or 'bad' it is – of an intimate relationship affects individuals' psychosocial wellbeing and their health and risk behaviours (Galliher et al., 2004). Individual characteristics such as empathic ability and fear of being rejected impacted on adolescents' assessments of relationship quality (Galliher & Bentley, 2010; Haugen, Welsh, & McNulty, 2008). Adolescents' experiences in their parent and peer relationships, particularly the quality of them, influenced the quality of their dating relationships (Roisman et al., 2009). Specifically, although relatively few adolescents who had good quality parent and peer relationships during childhood got involved in

dating relationships during early adolescence, those who did tended to have better quality relationships in comparison to teens who had poorer quality parent and peer relationships (Roisman et al., 2009). A variety of relationship and interaction characteristics in adolescents' intimate relationships have been found to influence relationship quality assessments. Participating in activities outside of school and open communication between partners have been positively associated with relationship quality (Carlson & Rose, 2012). Lower hierarchy sexual activity such as kissing positively influenced adolescents' relationship satisfaction; however, there were age differences in the impact of higher order sexual behaviours (Welsh, Haugen, Widman, Darling, & Grello, 2005). Specifically, sexual intercourse was negatively associated with relationship satisfaction among younger teens but had no significant impact on older teens' relationship assessment (Welsh et al., 2005). Girls' assessments of the quality of their intimate relationships have been associated with lower frequency conflict and higher frequency supportive behaviours displayed by their boyfriends whereas boys' assessments were associated with engaging in supportive behaviour toward their girlfriends and their ability to understand their girlfriends' perspectives and accept their influence during interactions (Galliher et al., 2004).

Qualitative research with older adolescents attending high school in the rural Eastern Cape and participating in an intervention evaluation study (Jewkes et al., 2010) gives some insight into relationship quality among local teens. Several adolescents reported that their relationships improved following participation in the Stepping Stones intervention (Jewkes et al., 2010). They described specifically that they were able to better express themselves with their partner, openly discuss various issues within the relationship, and they were better able to listen to their partner during these discussions (Jewkes et al., 2010).

The local and international research literature offers very little evidence about what characteristics of a relationship are taken into account when adolescents assess their relationships. For example, the role of intimate partner violence, sexual and reproductive health behaviours, substance use, and partner characteristics in

assessments of relationship quality is unknown. Developing an understanding of these assessments from adolescents' perspectives will give us insight into what adolescents value in their relationships and what may influence their choices within their intimate relationships. Building this knowledge is important for public health interventions seeking to minimise risks and negative outcomes related to dating relationships and maximise positive experiences and outcomes. This thesis will explore the role of various relationship factors including partner characteristics, intimate partner violence, sexual and reproductive health, communication, and conflict in adolescents' relationship assessments (see Chapter 4).

Adolescent sexual behaviour and dating

South African youth are affected by the HIV epidemic in the country and although the national prevention of mother-to-child transmission services have decreased the number of infants born HIV positive (Barron et al., 2013), child abuse, gender-based violence, and risky sexual behaviour expose children and adolescents to HIV. In addition, HIV among youth disproportionately affects girls and young women in comparison to boys and young men. Specifically, a national survey estimated the HIV prevalence among 15 to 24 year old women as 15.5% and 4.8% among young men of the same age (Pettifor et al., 2005). A survey of adolescents in two KwaZulu Natal high schools found the prevalence among girls to be 12.7% and 7.0% whereas among boys at the same schools it was 1.4% and 2.5% respectively (Kharsany et al., 2012). Among 15-19 year old girls attending an antenatal clinic, HIV prevalence was 12.7% (Department of Health, 2006). The sex differences described here indicate that it is important to analyse girls' and boys' behavioural patterns separately and that this information should play an important role in the development of prevention interventions (Abdool Karim, Sibeko, & Baxter, 2010; Rotheram-Borus, Ingram, Swendeman, & Flannery, 2009).

HIV is not the only sexually transmitted infection of concern, but there is very limited available data on the prevalence of other sexually transmitted infections among teenagers. Among 15-19 year old women attending antenatal clinics around South

Africa, 1.3% test positive for syphilis (Department of Health, 2006). Among senior high school students in the rural Eastern Cape, almost one third of the girls and approximately one tenth of the boys tested positive for Herpes Simplex Virus Type 2 (Jewkes et al., 2008). In a national sample of 15-19 year old women, 9.2% reported having a sexually transmitted infection or symptoms of one in the past year and among 15-19 year old men, 8.1% reported the same (Department of Health et al., 2007).

In addition to HIV and other sexually transmitted infections, unplanned pregnancy is another possible risk for sexually active teenagers. Research data from South Africa show that 35% of women under the age of 20 years have been pregnant at least once and the first pregnancies commonly occur while these women are still in high school (Jewkes et al., 2001). The recent South African Demographic and Health Survey (Department of Health et al., 2007), reported a dramatic rise in the proportion of adolescent girls who had begun childbearing; among 15-year olds, 2.1% had been pregnant which increased to 11.2% among 17-year olds and 27.1% among 19-year olds.

Condom use, older partners, and multiple concurrent sexual partners have all been measured as indicators of high risk sex among adolescents. Among sexually active senior high school students in the rural Eastern Cape, less than half of the boys and girls participating in the study used a condom correctly the last time they had sexual intercourse (Jewkes et al., 2008). Among the young women in this study, 19.9% reported using condoms consistently in the past year whereas 44.5% reported inconsistent condom use over the same period (Shai, Jewkes, Levin, Dunkle, & Nduna, 2010). In the same study, 15.4% of the older adolescent boys reported consistent condom use in the past year and 36.9% reported inconsistent condom use (Shai, Jewkes, Nduna, & Dunkle, 2012). A national survey found that 2.9% of 15-19 year old girls and 8.2% of 15-19 year old boys reported having two or more sexual partners in the past year, but concurrency of these relationships cannot be assumed (Department of Health et al., 2007). In the same survey, 3.2% of 15-17 year old girls and 5.2% of 18-19 year old girls reported having sex with a partner who was 10 or more years their

senior (Department of Health et al., 2007). These risk behaviours contrast with older adolescents' generally sound knowledge about HIV and HIV prevention (Department of Health et al., 2007). Also concerning is the reported trend among local teenagers not to plan for or discuss sex with their partner even when they become sexually active (Harrison et al., 2001; O'Sullivan, Harrison, Morrell, Kubeka, & Monroe-Wise, 2006) and the peer pressure that they experience to become sexually active and share their experiences with their friends (MacPhail & Campbell, 2001; Selikow et al., 2009).

Given these potential outcomes of teenage involvement in sex, it is not surprising that several South African studies have explored adolescent sexuality in order to inform prevention efforts. Many contemporary South African youth experience sexual debut between the ages of 14 and 19 years (Department of Health et al., 2007; Flisher, Reddy, Muller, & Lombard, 2003; Jaspan et al., 2006; Pettifor et al., 2005; Pettifor et al., 2004; Simbayi, Chauveau, & Shisana, 2004). A cross-sectional study among school-going adolescents in Cape Town found that 11.9% of 12-year old boys and 0.9% of 12-year old girls, and 45.9% of 16-year old boys and 24.5% of 16-year old girls reported that they had experienced sexual intercourse (Flisher et al., 2003). Over a 15-month follow up period during a school-based study with young teenagers (age 13 years) in South Africa and Tanzania, approximately one in five participants who were sexually inexperienced at baseline experienced coital debut during the study period (Mathews et al., 2009). These studies indicated that a significant proportion of South African teenagers are sexually active and many from a young age. Further, several of these sexually active adolescents are experiencing negative outcomes including contracting a sexually transmitted infection or pregnancy as described above. However, all of this research, and most of the local and international adolescent sexuality research, focuses only on one area of adolescent sexuality – sexual intercourse.

Sexuality and sexual exploration occurs along a larger spectrum of behaviours ranging from hand holding, hugging, and kissing to petting, masturbation, oral sex, vaginal sex, and anal sex (Auslander, Rosenthal, & Blythe, 2006; Waylen, Ness, McGovern, Wolke, & Low, 2010; Welsh et al., 2005). Findings from international studies

support this assertion. Specifically, between a quarter and a half of the adolescent participants in studies in the USA and UK have engaged in lower hierarchy sexual behaviours such as hand holding, hugging, and kissing and only up to a fifth reported engaging in any penetrative sex acts including oral, vaginal, or anal sex; however, fewer younger (11-13 year olds) than older (14-16 year olds) adolescents reported all of these behaviours (Sneed, Strachman, Nguyen, & Morisky, 2009; Waylen et al., 2010). Data about South African adolescents engaging in such a variety of sexual behaviours is not available in the peer-reviewed literature.

Adolescents explore their sexuality in a variety of relationship contexts (including dating and non-dating, serious and casual relationships) and individually (Auslander et al., 2006; Bay-Cheng, Robinson, & Zucker, 2009; Ciairano et al., 2006; Collins, Welsh, & Furman, 2009; Furman, 2002) yet few teen sexuality studies focus on the relationship between sexual partners. Qualitative work conducted in two regions of South Africa – KwaZulu Natal (Harrison et al., 2001; Harrison et al., 2001) and Eastern Cape (Jewkes & Morrell, 2012; Jewkes et al., 2010) – provide some insight into teenagers' sexuality and intimate relationships. These studies found that the relationship power dynamics play a role in adolescents' sexual experiences. That is, dominant sexual scripts were highly gendered in that boys held more power than girls which was demonstrated by boys taking on the role of initiating sexual intimacy, choosing whether to use and provide contraception, and at times having multiple concurrent partners (Harrison et al., 2001; Jewkes & Morrell, 2012). In addition, certain sexual behaviours are thought, by teenagers, to impact on the relationship; for example, using condoms was viewed as interfering with romance and love, and increasing distrust in the relationship (Harrison, 2008; Harrison et al., 2001; MacPhail & Campbell, 2001; Pettifor et al., 2005; Selikow et al., 2009).

Taking a broader view of types of sexual behaviours would be consistent with taking a developmental perspective on sexuality. Several researchers have called for such a perspective to shift the 'risk lens' that pervades much of the adolescent sexuality field to a more balanced view that understands that sexual expression is

developmentally normative and even healthy during adolescence (Auslander et al., 2006; Welsh et al., 2005; Zimmer-Gembeck & Helfand, 2008). However, our understanding and evaluation of these behaviours should take into account the developmental stage of the adolescent group engaging in them. That is, penetrative sexual behaviour among young adolescents is high risk and early sexual debut is correlated with low levels of contraceptive use, multiple sexual partnerships, sexually transmitted infections and HIV, early pregnancy, and psychosocial challenges in later adolescence and adulthood (Christofides, 2012; Ciairano et al., 2006; Collins, 2003; Harrison, Cleland, Gouws, & Frohlich, 2005; Jewkes et al., 2001; Mathews et al., 2009; Pettifor, van der Straten, Dunbar, Shiboski, & Padian, 2004; Shulman, Walsh, Weisman, & Schelyer, 2009; Wand & Ramjee, 2012; Zimmer-Gembeck & Helfand, 2008).

The concern with young adolescents is that even if they avoid the negative health outcomes discussed above, their early sexual experiences shape and influence individual practices for sexual behaviour. Therefore, if these initial experiences are negative or risky instead of healthy and positive, there is a greater likelihood of future sexual risk behaviour and experiencing the myriad of negative outcomes associated with this behaviour. More insight into South African adolescents' development of their sexuality is needed to inform interventions to reduce risks associated with sexual behaviours during this developmental phase. Specifically, it is necessary to understand how common the various sexual behaviours are among younger adolescents (under age 16) and how dating plays a role in these experiences. This thesis will describe the extent to which young teens are engaging in a spectrum of sexual behaviours including risky sexual behaviours, compare sexual behaviours among dating and non-dating teens, and explore associations between background characteristics, dating status, and having penetrative sex (see Chapter 5).

Aim of this thesis

In South Africa, highly prevalent intimate partner violence and poor sexual and reproductive health outcomes among adolescents indicate an urgent need for prevention interventions. Specifically, there is a need for engaging, relevant, evidence-

based interventions to prevent intimate partner violence, promote sexual and reproductive health, and promote healthy, enjoyable relationships during adolescence. The aim of this thesis is to improve our understanding of contemporary adolescents' intimate relationship in in South Africa. Local and international studies have focused on violence in adolescents' relationships and efforts have been made to design effective interventions to prevent such abuse. Such interventions must be informed by a nuanced understanding of the context within which this violence occurs – namely, the nature of teenagers' intimate or dating relationships. The purpose of building this knowledge is to inform the development of feasible public health interventions in SA to prevent intimate partner violence, minimise sexual and reproductive health risks, and promote healthy, enjoyable intimate relationships among adolescents in an engaging and relevant way. Table 1 provides a brief summary of the main findings in each topic and notes the specific gaps that will be addressed in this thesis.

Table 1. Summary of existing evidence and gaps in the literature to be addressed in this thesis

<i>Topic</i>	<i>Brief summary of existing knowledge</i>	<i>Gaps to be addressed in this thesis</i>
Adolescent intimate relationship research	Research in this area is mainly from the global North (particularly North America).	Contribute evidence from South African adolescents' intimate relationships. (Chapters 3, 4, 5)
	Few studies present a developmentally sensitive analysis of the data.	Consider the differences and similarities between groups of teenagers at different developmental stages. (Chapters 3, 4, 5)
Evidence-based violence prevention interventions in high schools	There is an absence of evidence-based violence prevention interventions designed for implementation in schools in LMICs.	Develop a guide to designing school-based violence prevention interventions for adolescents in LMICs. (Chapters 2, 6)

Contemporary adolescents' conceptualisations and constructions of intimate relationships	Most of the research is from North America so we know very little about local teens' dating relationships. Local research has confirmed that South African teenagers do engage in these relationships primarily from sexuality and violence research which have emphasised risks and adverse outcomes, and described the influence of gender in them.	Describe the micro-dynamics of adolescents' intimate relationships – how they think about, engage in, and experience these relationships. (Chapter 3)
		Explore adolescents' conceptualisations of good or positive intimate relationships. (Chapter 4)
Sexual behaviour and intimate relationships	Local adolescent sexuality research has focused on coital debut, engagement in intercourse, and risky sexual behaviours related to teen pregnancy and HIV infection.	Describe the extent to which young adolescents engage in a variety of sexual behaviours and how their dating status impacts on levels of experience. Identify factors influencing engagement in penetrative sex in this age group. (Chapter 5)

Specific objectives:

A mixed methods approach was used to address the following specific objectives related to the aim of the thesis:

- 1) Describe a guide to designing school-based violence prevention interventions for adolescents in low resource settings.
- 2) Describe how contemporary adolescents' conceptualise, engage in, and experience dating relationships at different ages.
- 3) Describe which relationship factors – including intimate partner violence and sexual and reproductive health – play a significant role in older adolescents' relationship assessments.
- 4) Describe the types of sexual behaviours that young adolescents engage in and how involvement in dating relationships influences this behaviour.

- 5) Synthesise the public health intervention implications of the insight gained from objectives 1-4.

Overview of the thesis

In Chapter 2, a critical review and synthesis of the available literature on school-based violence prevention interventions in LMICs notes that the paucity of such research should not inhibit the development of these essential programmes. It is important to consider intimate partner violence prevention within the broader context of violence prevention among youth and schools offer the opportunity of engaging most adolescents with universal-type interventions. Drawing on existing knowledge about patterns of violence among adolescents in South Africa and characteristics of non-violent schools and successful interventions, this chapter provides a guide to intervention developers working in other similar contexts. Further, the chapter describes interventions within an approach x content framework. This chapter focuses on characteristics of interventions, whereas the following three chapters will focus more on the characteristics of the adolescent romantic relationship context. This thesis chapter has been published in a peer-reviewed edited volume on youth violence (Gevers & Flisher, 2012).

In Chapter 3, a qualitative research study with a group of younger and older adolescent girls and boys is described. This study provides insights into the micro-dynamics of teenagers' ideas and practices surrounding their dating relationships. The chapter introduces the study, describes the study method and results, and discusses the findings in context of other relevant research. The findings presented in this chapter offer an understanding of the complexities of adolescents' relationships that must be taken into account when developing intervention content. This thesis chapter has been published in an international peer-reviewed academic journal (Gevers, Jewkes, Mathews, & Flisher, 2012).

In Chapter 4, a quantitative analysis of older adolescents' relationship assessments is described. Specifically, the influence of various relationship factors

including partner and relationship characteristics as well as risk behaviour on relationship assessment is examined. The chapter introduces the study, describes the study method and results, and discusses the findings and contextualises them within the broader literature. The findings indicated similarities and differences in girls' and boys' relationship values and suggest various issues that should be addressed in interventions. This thesis chapter is currently under review at an international, peer-reviewed academic journal (revisions based on reviewers' feedback have been submitted).

In Chapter 5, a quantitative study of young adolescents' dating and sexual behaviour is presented. The study method, results, and discussion are presented. The chapter describes the kinds of sexual behaviours young adolescents reported and how the currently dating and currently not dating groups differ. Further, associations between background, dating status and risk behaviours, and experience of sexual intercourse are explored. The findings indicate the importance of providing sexuality education from an early age. This thesis chapter is currently under review at an international academic journal (revisions based on reviewers' feedback have been submitted).

In Chapter 6, an integrated discussion of the findings presented in this thesis is provided highlighting how they have answered some of the gaps in the current literature noted in the introductory chapter. New contributions to the research literature include insight into the micro-dynamics of contemporary South African adolescents' intimate relationships, older teenagers' conceptualisations of 'good' dating relationships, and young teens' engagement in a variety of sexual behaviours ranging from kissing and petting to intercourse. The discussion then expands on the implications of these findings for intervention development and summarises the recommendations for intervention designers, particularly school-based interventions that are likely to reach the majority of adolescents in South Africa and have an impact on the peer group with whom adolescents spend a significant proportion of their time during this period. Adolescents' engagement in dating and sexual relationships across the developmental spectrum albeit at different rates suggest the need for universal, but developmentally sensitive

approach in interventions. I recommend that such interventions include content dealing with sexuality and sexual decision-making, peer concepts and pressures, and gender equity and constructions. Further, findings across the chapters of this thesis suggest that they should offer adolescents the opportunity for critical reflection on personal and group norms and assumptions of romantic relationships as well as equip them with skills to communicate more openly and respectfully with their partners.

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CHAPTER 2

PREFACE

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Conceptualisation:

Although the broad topic of this book chapter (school-based violence prevention) was agreed with the editors of the volume, I lead the conceptualisation of the chapter and conducted the literature review, synthesis of data, and formulation of guidelines that are presented in the chapter. I wrote the full draft and made all subsequent revisions to it. Prof. Flisher supervised each phase of this project and reviewed all drafts and approved the final draft that was submitted for peer review.

Authors' contributions:

A. Gevers – data collection (literature review including academic literature and technical reports), data analysis and synthesis, writing full draft and all revisions of the chapter

A.J. Flisher – mentoring

Additional motivation for inclusion:

This chapter addresses Objective 1 of the thesis and is presented in the format of a published book chapter. All chapters in this edited volume went through a peer-review and revision process as well as review by editors of the volume to ensure a high academic quality of each chapter.

Although there is a drive to use evidence-based interventions for public health and violence prevention work, there are very few such interventions designed for or evaluated in low resource contexts such as South Africa. Therefore, people wanting to implement such programmes have few “proven” materials to draw on. This book chapter fills a gap in the field of violence prevention in South Africa by providing a guide to developing school-based violence prevention interventions. The chapter reviews evidence published in academic peer-reviewed literature and technical reports (e.g., from Pan-American Health Organisation and the World Health Organisation) and synthesises information that would be particularly useful in developing school-based violence prevention programmes. This book chapter is an important inclusion in this thesis because it contributes to the overall aim of informing intervention development and I argue that in addition to understanding the nature of the issues to be targeted in an intervention, it is also essential to consider the various ‘design factors’ in intervention development and these are described in the abovementioned book chapter.

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CHAPTER 2

A guide to designing school-based violence prevention interventions for adolescents in low resource settings

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School-based youth violence prevention interventions

Authors:

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INTRODUCTION

Ideally, schools provide youth with several benefits beyond a formal education. They facilitate optimal cognitive development and provide opportunities for developing social, emotional, and cultural competencies that create a solid foundation for success in adulthood. However, these benefits are eclipsed or not fulfilled at all when schools struggle with challenges such as high levels of violence. Research evidence and the popular press have drawn attention to the high levels of violence committed by and against youth in South African society, and specifically in schools, which are often not the safe havens that we idealise them to be. This challenge demands immediate intervention.

The South African constitution sets forth that “a child’s best interests are of paramount importance in every matter concerning the child” (Section 28 of the Bill of Rights). In addition, every South African child has the right to protection from maltreatment, neglect, abuse, degradation, or exploitation. These rights enshrined in the Constitution are similarly guarded by the United Nations Convention on the Rights of the Child, which was ratified by South Africa in 1995. However, the high levels of school violence suggest that we are not adequately protecting and promoting the best interests of children. Youth exposure to either direct or indirect physical, verbal, or sexual violence or bullying at school concerns more than just the school system, because it is a

human rights and public health issue that demands the attention and resources of multiple sectors. Such collaboration is particularly important if we are to successfully intervene and prevent future school violence.

Several factors create opportunities for such violence, including lack of security and poor infrastructure, poor supervision of learners, little support or avenues for reporting violence and helping victim-survivors, and lenient or no policies to effectively deal with perpetrators. However, youth violence in schools merely exploits these vulnerabilities and is not caused by these weaknesses. Indeed, the aetiology of school-based violence is complex and interwoven throughout the school and its day-to-day functioning as well as several non-school, systemic and individual factors. This aetiology is important to consider particularly when developing school violence prevention programmes. We will not provide a detailed analysis of this topic; instead, we shall outline the most common factors that play a role in the causation of school violence.

Violence permeates contemporary South African society and has become a part of its culture (Biersteker & Robinson, 2000). South Africa's history is marked by high levels of violence and this legacy plays an important role in weaving violence into the nation's culture. During several historic struggles, particularly the recent political struggle against Apartheid, civilian violence was often lauded as an appropriate response to state violence (Bhana, 2005; Biersteker & Robinson, 2000; Burton, 2008;). This culture of violence means that violence is viewed as a legitimate means of achieving personal and social goals and expressing dissatisfaction. However, historical legacies of violence alone do not account for the very high levels of youth violence in South African schools.

Other systemic issues, including poverty and social inequality also contribute to youth violence as youth react to the continued experiences of disempowerment and attempt to secure some personal power in whatever arena and in whichever way that they are able. School violence is not only restricted to economically disadvantaged groups; indeed, research evidence suggests that socioeconomic status does not offer

protection from violence, which, albeit in different manifestations, is prevalent in low-income and high-income schools (Burton, 2008). In addition to the struggle for scarce resources in many families and communities, levels of family violence or family involvement in crime and leisure boredom contribute to school violence as the school, home, and community contexts are mutually influential (Biersteker & Robinson, 2000; Caldwell et al., 2004). Also problematic is the lack of adequate services for victims and perpetrators of violence and their families. By not appropriately addressing trauma with victim-survivors and their families and also not effectively addressing violent behaviour with perpetrators, the behaviour is not remediated and the cycle of violence from childhood through adulthood at various levels of society is perpetuated. High levels of substance abuse also play a role in violent behaviour (Champion et al. 2004; Champion, Wagoner, Song, Brown & Wolfson 2008; Dunkle et al. 2006). Several school factors also play a role in the aetiology of youth violence and these will be discussed later in the chapter. It is perhaps not surprising that youth resort to violence given the lessons they learn within their own neighbourhoods, communities, and country where violence has become a norm (Burton, 2008).

At the individual level, youth's personality and ability factors need to be considered as contributory factors to youth violence (Burton, 2008). These individual factors are in turn adversely affected by contexts in which youth live. Each of the aetiological factors discussed do not alone predict school violence; it is the interactions between individual and environmental factors that contribute to the widespread problem of youth violence in South African schools.

This chapter will focus on primary school (Grade 1 to Grade 7) and secondary school (Grade 8 to Grade 12) violence by providing a summary of the nature and extent of violence in South African schools and then discussing the common outcomes of exposure to such violence. Following the presentation of a rationale for school-based interventions, we will discuss general characteristics of successful school-based interventions and describe several South African programmes that address the problem of school violence.

VIOLENCE IN SCHOOLS

In contravention of the nation's commitments to uphold the rights of all children to learn in a safe environment, South African children are exposed to high levels of violence within their school contexts in addition to the high levels of violence in South African homes and communities. School-related violence is often perpetrated by fellow learners or school staff, and at times perpetrators from the community or other schools enter the school specifically to commit violent acts. This violence takes many forms, including corporal punishment, bullying, gang related behaviour, sexual abuse, physical assault, verbal abuse, theft, robbery, and threats. Not only does school violence take many forms, it can also have different functions, including establishing a social hierarchy, retaliating against a perceived wrong-doing, or disciplining transgressions (Burnett, 1998).

Overview

During the recent National Schools Violence Study, 12 794 learners, 260 school principals, and 521 educators across South Africa were interviewed about violence in schools (Burton, 2008). Primary (n=120) and secondary (n=140) schools in metro (22.8% primary, 21.5% secondary), urban (29.9% primary, 45.9% secondary), and rural (47.2% primary, 32.6% secondary) areas in all nine provinces participated and learners (53% attending secondary school) from every grade in each school were recruited for the structured interviews. The study found that 15.3% of school pupils in South Africa reported experiencing some form of violence at school in the last 12 months. This violence took the form of threats (12.8%), physical assaults (5.8%), sexual assaults (2.3%), robbery (4.6%), theft (25.9%), or bullying (12%). Except for physical assaults, all of these violent acts are more likely to occur at the higher levels of secondary school than more junior levels. Respondents in this study reported that their experiences of violence in the school were not isolated, but that the perpetrators were most often known to them and that violent victimisation occurred several times. Exacerbating this situation is the availability of weapons, alcohol, and drugs within the school and community settings (Burton, 2008). Schools have come to reflect the high levels of violence in South African society.

Learners report fearing specific locations in their schools – the most feared of which are the toilets for both male and female learners (Burton, 2008). However, the most common site of violence in schools is classrooms, particularly those in which learners are left unsupervised (Burton, 2008). Other areas that learners fear are open areas or playing fields and sports fields; these areas are often not well supervised creating opportunities for violent victimisation (Burton, 2008). Also part of the school context is the twice-daily trip between youth's home and school. This trip makes youth particularly vulnerable as they often have to use public transport or walk without an adult chaperone and 14.3% learners, particularly girls, admitted to fearing this trip (Burton, 2008). Little is known about violent victimisation on this trip because it is often not considered in school violence research and is not differentiated in studies on community violence. Nevertheless, it is a venue of youth violence and as it affects school attendance and academic performance it should be considered under the concept of school violence.

Specific types of violence

Specific types of violence, namely bullying, gang activity, educator-on-learner abuse, and sexual violence, disproportionately afflict the school-going youth population in South Africa, and we thus give them additional attention here.

Bullying

Bullying, which encompasses repeated negative physical or psychological actions by an individual or group of individuals, is an international problem. Results from self-report questionnaires completed by Grade 8 learners in Cape Town indicated that 52% of boys and 37% of girls were involved in bullying during the past year (Townsend, Flisher, Chikobvu, Lombard & King, 2008). Data from a self-report survey completed by Grade 8 and Grade 11 learners in Cape Town and Durban show that 36.3% of these students were involved in bullying within the past 12 months (Liang, Flisher & Lombard, 2007). These youth could be further classified into one of three categories: bullies (8.2%), victims (19.3%), and bully-victims (8.7%) (Liang et al., 2007). Among a sample

of Grade 11 learners in the Eastern Cape who completed self-report questionnaires of their bullying-related behaviour and experiences during the past year, 3.9% were found to be bullies, 16.5% were found to be victims, and 5.5% were bully-victims (Mlisa, Ward, Flisher & Lombard, 2008). Generally, higher rates of involvement in bullying were found among younger students and males (Townsend et al., 2008; Liang et al., 2007). Recent research has identified that there are several other roles that youth can fill within bullying interactions, including that of ringleader, follower, or reinforcer as well as being an outsider or a defender such that, within a school system, it is likely that most children will become involved with bullying in some way (Smith, 2004). Involvement in bullying has been linked with school dropout. Specifically, female students who drop out of high school were more likely to be bully-victims before dropping out of school (Townsend et al., 2008). Among male dropouts, significantly more of those students who dropped out of high school than those who stayed were bullies or bully-victims while at school (Townsend et al., 2008). Other adverse outcomes have also been associated with bullying. For example, bullies have been found to be more likely to be involved in violent, anti-social, and risk behaviours than those youth not involved in bullying at all (Liang et al., 2007). Bully-victims had similar risk profiles as the bullies although they also shared some levels of risk behaviour and violence with the victims (Liang et al., 2007).

Gang activity

Focus group discussions with Cape Town high school learners indicated that schools are a vulnerable site for gang activity, particularly in the Cape Town area (Bility, 1999). Student reports indicated that males starting high school are the primary targets for gang recruiting; however, initiation into gang activity often begins at the primary school level. Students described that in addition to the formal gangs that are usually run by adults, some friendship groups among youth develop into informal gangs in schools. Both formal and informal gangs are disruptive in schools for a variety of reasons: they conduct their gang business (bullying or intimidation, drug pedalling, obtaining or selling stolen property, or prostitution) on school property; or they demand payment from non-members in exchange for momentary safety from gang violence; or they force school

closure with threats or acts of vandalism and other violence against staff and/or learners (Bility, 1999). Much gang activity takes place around the toilets, particularly drug dealing, and gang members are prone to assault those students who innocently arrive in this area with no intention to become involved in these activities (Burnett, 1998; Burton, 2008). Most gangs have anti-social values and violence plays a predominant role in gang activity within the gang, between gangs, and within communities. Youth are drawn to this sub-culture that offers them an attractive alternative to the mainstream society in which they are largely disempowered (Bility, 1999). Not only are the youth gang members socialised into a violent lifestyle, but this choice encourages a continuation of high levels of youth violence and, through gang status, a glorification of such a lifestyle among many children. Furthermore, gang activity in and around schools continues to disrupt schooling of South African youth.

Educator-on-learner violence

In the context of school violence, educators do not only fill the roles of preventing violence and intervening after violence has occurred. In some cases, educators also perpetrate various forms of violence against learners. Principals at two out of every five schools reported known incidents of educator-on-learner verbal abuse and principals at one out of every four schools reported educator-perpetrated physical abuse of learners (Burton, 2008). The extent of such violence is largely unknown because the abovementioned respondents only admitted to knowledge of several such incidents but provided no more detail. Similar to learner-perpetrated school violence, schools generally do not keep detailed records about educator-perpetrated violence. Given that principals and learners report that educator-perpetrated violence has occurred on more than one occasion, it can be acknowledged as a concern and additional research should explore the issue. Although not much is known about educator-perpetrated violence in schools, evidence is being pieced together particularly from learner reports.

Most commonly, educators use corporal punishment to discipline learners even though this form of punishment violates South African legislation (Burton, 2008). The majority of primary school learners (70.1%) and almost half (47.5%) of secondary

school learners reported experiencing corporal punishment delivered by an educator or principal (Burton, 2008). Educators using corporal punishment justify this method by maintaining that no other method of discipline and control is effective (Burton, 2008). There is a strong correlation between the levels of corporal punishment used in a school and the levels of learner violence in the same school, but no causal direction for this relationship has been established (Burton, 2008). In addition to this physical violence, educators have also been implicated in verbal abuse such as shaming, humiliating, or yelling at learners, particularly in group situations. In 5.8% of thefts, 5% of threats, and 4.6% of robberies, learners identified educators as the perpetrators (Pelser, 2008), indicating that educators are involved in several types of school violence as perpetrators.

Also concerning are the so-called 'love relationships' between educators and learners which are most often initiated by educators (Burton, 2008). Prevalence data is difficult to ascertain given the high level of secrecy around these relationships; however, such relationships are common enough to enter into youths' discourse and awareness of violence in the school context. Educator-perpetrated sexual abuse does not only occur in the context of relationships, but various forms of sexual abuse against learners take place in schools (Burton, 2008; Pelsers, 2008). Regardless of whether these relationships are consensual or not, they are unethical and a violent act against the learner in the relationship as well as those at risk for being lured or coerced into such relationships, and these relationships should not be tolerated by the school administration (Pelser, 2008). These examples discuss direct forms of violence perpetrated by educators, but we contend that educators who do not prevent or intervene in school violence condone it through their silence and inaction, which is in itself is a contribution to school and youth violence in South Africa.

Sexual violence

Violence is woven throughout social relations between boys and girls even at very young ages (Bhana, 2005). This violence is, at least in part, a manifestation of the social constructions of masculinity and femininity together with the gender inequality which

affords males more power than females (Bhana, 2005). This gendered violence often takes the form of sexual violence and rates of sexual violence in South Africa are among the highest in the world. Although the Department of Education does not collect data specifically on sexual violence in schools, researchers have documented that such violence occurs within schools around the country (Burton, 2008; Human Rights Watch, 2001). Young girls are often the victims of various forms of sexual harassment and assaults or the threat of it in their home, community, and school environments. It should be noted that although girls are most often the victims and boys most often the perpetrators of sexual violence, boys also experience sexual victimisation; indeed, among primary school learners who reported sexual victimisation there was a larger ratio of boys than girls (Burton, 2008). Teachers, other school staff, other school pupils and community members are among the perpetrators of sexual violence and they often face little or no consequences of these violations even within school systems (Human Rights Watch, 2001). When male learners are the perpetrators they often act in groups, not only making it difficult for female learners to escape, but also making them vulnerable to gang rape (Human Rights Watch, 2001). Female victims often know the male learner perpetrators as friends, classmates, or fellow pupils. In addition, high rates of violence occur within intimate relationships. In a Western Cape sample of school-going adolescents in intimate relationships, 20.7% reported perpetrating partner violence and 16.4% reported an intention to do so (Flisher, Myer, Marais, Lombard & Reddy 2007). Although this violence encompasses any, not only sexual, violent act directed at a partner, violence within an intimate relationship may make partners acquiesce to sex with their violent partner out of fear or learned submission (Jewkes, 2002).

The National Schools Violence Study found that 3.1% of secondary school learners and 1.4% of primary school learners reported experiencing unwanted sexual contact in the past year while at school, most commonly at the toilets or in classrooms (Burnett, 1998; Burton, 2008). These figures are considered conservative not only because of the issue of underreporting of this type of violence, but also because respondents may not have included verbal sexual harassment, fondling, or groping. In

addition, these numbers exclude those pupils who believe they are engaging in a consensual sexual relationship even if it is violent or illegal. Further, these figures include only sexual contact that occurred within the school. Researchers have documented how female learners are sexually harassed or assaulted through sexual comments, attempts and actual groping or fondling by male learners even in full view of adults (Bhana, 2005; Burton, 2008; Human Rights Watch 2001). These adults often take no action to stop or discipline the offenders and support the victims (Burton, 2008; Human Rights Watch, 2001). This inaction suggests that the sexual behaviour is acceptable and such an attitude exacerbates the problem. Acts of sexual violence are not isolated; half of the learners who reported being victims of sexual assault also reported that they had been victimised in this way more than once (Burton, 2008). Within schools there is generally little support for the victims of sexual violence and many victims do not report these experiences for fear of further negative consequences from the perpetrator(s), fellow learners, or school staff; or because of a belief that they will not be believed or helped (Burton 2008; Human Rights Watch 2001). There are no adequate services for perpetrators of sexual violence, particularly learner-perpetrators (Human Rights Watch, 2001). This paucity of services exacerbates the problem of violence in South African schools and the adverse outcomes arising from the high levels of violence.

RELATIONSHIP OF VIOLENCE TO ADVERSE OUTCOMES

School violence has a myriad of negative consequences and adverse outcomes for victims and their families, perpetrators, educators, and other learners. Many of these adverse outcomes have long-term and wide-ranging effects. Violence carries with it risk of both physical and psychological harm as well as negatively impacting on youths' cognitive and social development (Burton, 2008; Ward, Flisher, Zissis, Muller & Lombard, 2001). In addition to the range of physical injuries potentially resulting from violence, sexual assault also carries the additional risks of HIV and other STIs, and pregnancy. School violence undermines youths and educators' abilities to function healthfully both within and outside the school context (Burton, 2008).

The negative psychological sequelae of exposure to violence have been well-documented in youth. Youth who have been exposed to violence, either as witnesses or victims of violence perpetrated by either someone they know or a stranger, often experience symptoms of post-traumatic stress disorder and depression (Ward et al., 2001). Further, if the violence was perpetrated by a familiar person, youth are also likely to experience anxiety (Ward et al., 2001). Youth exposed to violence are also at significantly greater risk of engaging in antisocial or delinquent behaviour, and as adults they are more likely to become involved in criminal behaviour (Burton, 2008). Bullies are more likely than victims and youth not involved in bullying to be involved in other violent behaviour (e.g. fighting, carrying a weapon), antisocial behaviour (e.g. theft, vandalism), and risk-taking behaviour (e.g. walking alone, driving after using substances, being a passenger of a driver who has used substances, smoking, alcohol use, and cannabis use) (Liang et al., 2007). Bully-victims differ from bullies only with their higher rate of suicidal ideation, which was at a similar level to that of victims (Liang et al., 2007). Bully-victims are also significantly more likely to engage in vandalism and suicidal behaviour than either bullies or victims (Liang et al., 2007). This information indicates the importance of providing services for both perpetrators and victims, particularly those youth who may be both perpetrating violence and victimised in other acts of violence.

The core mission of schools, to educate youth, is undermined by violence because it interferes with youths' academic development and performance (Burton, 2008; Ward et al., 2001). Absenteeism, truancy and school drop-out rates are significantly increased in schools with continuous violence (Burton, 2008; Townsend et al., 2008). Among youth who have dropped out of school, more are likely to report involvement in bullying, particularly as bullies or bully-victims; however, no causal direction in this relationship can be deduced at this point (Townsend et al., 2008). Victims of sexual violence also suffer disrupted schooling as they often miss a lot of school, transfer schools, or drop out of school entirely (Human Rights Watch, 2001). Even if they continue to attend school, their concentration is often impaired following the sexual trauma thus resulting in a decline in academic achievement (Human Rights Watch, 2001).

Youth attending schools where violence is common tend to have a cynical worldview and are often pessimistic about their own future prospects (Bility, 1999). With such attitudes it is perhaps not surprising that these youth often make poor choices. The negative effects of school violence jeopardise youths' futures and this affects the futures of our communities and society. Youth grow up almost without any safe havens and the foundations for their adulthood are disrupted by violence. Moreover, the lack of appropriate responses to school violence merely serves to create an impression of acceptance of such behaviour. Thus, youth learn that violence is acceptable and that there is little that can be done to challenge it. In the case of gendered violence, gender inequality is inculcated in youth such that it is more likely to be perpetuated throughout their adulthood as is the general culture of violence and disrespect for human rights.

RATIONALE FOR INTERVENING IN SCHOOLS

The high levels of school violence, and its negative sequelae, indicate that violence prevention interventions are urgently needed. Schools are a particularly important setting for such interventions. Indeed, school-based violence prevention can potentially address broader contexts such as interpersonal violence in addition to intervening on issues of violence within schools. The school environment offers ease of access to young people, with 73.6% of South Africans between the ages of 5 and 24 years attending an educational institution, and 90% of those aged 5 to 19 years doing so (Department of Education, 2007; Flisher et al., 2000). Thus, a larger proportion of youth are likely to be exposed to a violence prevention programme within a school setting than any other formal or informal gathering places. As a powerful socialising agent, schools shape youths' lives and prepare them for adulthood through affecting their cognitive, social, emotional, and cultural development; therefore, violence prevention in this setting can have an impact even beyond the school itself.

By mobilising the existing resources of the school, interventions in this setting can be cost effective. Even if additional resources are necessary to develop and implement an intervention, they are minimised since existing infrastructure, facilities and processes can be utilised. Indeed, the very ecology of the school environment can be an asset to

violence prevention programmes if prosocial aspects of the school and the curriculum are mobilised and strengthened. The curriculum revision in 2006 mandated the inclusion of life orientation classes that aim to provide learners with the skills and knowledge to choose healthy lifestyles, including appropriate problem solving, respect for others, and an understanding of human rights (Department of Education Website, 2008). These topics are also recommended components of violence prevention programmes (Biersteker & Robinson, 2000). School-based interventions can address the unique violence within the schools that is all too prevalent. School-based programs have the opportunity not only to prevent violent behaviour and redress its negative consequences, but also to begin to promote health and well-being in youth by creating a safe environment. Further, the school environment can be utilised in non-traditional ways for the purpose of addressing youth violence such as inviting parents and community members to participate in safety and anti-violence programming. Through such programming, the school can become a symbol and leader in the community for safety and promotion of youth positive development. The school setting also provides opportunities for evaluations of interventions such that the evidence base can be built to ensure implementation of programmes that are effective.

Working in schools is not without its challenges, which need to be addressed proactively to maximise the likelihood of success. Schools are not a homogenous group and any programme and working relationship will need to bear in mind the specific context of an individual school including resource availability, infrastructure, size, school and teaching culture, and the management and organisation of the school. Therefore, the relationship between the school stakeholders and the programme and research stakeholders is an essential foundation for any school-based interventions. This relationship needs to be open, positive, and collaborative instead of defensive and oppositional. Even though both parties may agree on the goal of creating safety and preventing violence, they also have potentially different additional goals and ideas of how to achieve the common goals. Congruence between programme and school philosophies about violence and safety should not be assumed, but it should be a goal to establish it during the process of building school-based interventions at individual

schools. A positive working relationship should allow for identification of existing strengths of all parties involved such that these can be maximised potentially with the need to rearrange systems to fit programme models. Careful discussions should focus on what is feasible and relevant within a particular school setting such that a balance between flexibility and fidelity of programming can be achieved. Although the largest portion of government's budget is allocated to education, South African schools are facing significant resource shortages that place a very high demand on teachers and other school staff as well as the infrastructure. Some schools experience greater resource challenges than others and also there are differences between schools in how they allocate their resources and their development priorities. This situation demands careful discussions to understand a school's resource profile and how violence programming fits into the strategic plan. Creative use of existing resources, sharing resources, and attaining vital resources through partnerships and strategic aid will likely be needed in order to best address youths' needs and create a healthy and safe school environment. A strong partnership will facilitate more support for and sustainability of the prevention programme and thus this relationship is an essential foundation for the success and ultimate achievement of safety in any school.

Also important are considerations about the community within which the school is located and the families and communities where the learners live. It is important to consider both risk and protective factors related to youth violence within learners' homes and neighbourhoods. Another situation that programme specialists need to bear in mind is the school culture including high rates of absenteeism in many schools. The argument could be made that if the school environment becomes less violent and safer, then the problems of drop out and absenteeism may decrease, and learners may become less afraid and more motivated to participate in schooling. Indeed, programmes aimed at preventing or reducing substance use and risky sexual behaviour have contributed to reduced drop out (Flisher et al., 2000). However, programme developers must take into consideration school and class attendance and norms around classroom and school behaviour. For example, programmes that require after school activities, homework, or discussion groups may not be feasible in all schools. In addition, some

schools may have violence and safety programming of some sort and learners' exposure to these interventions will impact how they respond to new or additional programming. These challenges are not insurmountable and the potential gains from implementing youth violence prevention programmes in schools suggest that these efforts would be rewarded. Although programmes have to be tailored to specific school contexts, there are some general guidelines that are useful to consider and these are discussed in this chapter. This chapter presents an ideal perspective and we acknowledge that achieving the gold standard may not always be workable in every context; however, this information is based on what existing evidence suggests to be effective and is open for revision when additional evidence becomes available. The guidelines presented here should be regarded as flexible and we urge programme developers to interpret and implement the guidelines in ways that are relevant, feasible, and workable within the context of intervention.

Schools are an important site for school-related violence prevention and safety promotion offering several opportunities for integrative programming, but also several challenges to negotiate. We surmise that such programmes have the potential to facilitate several positive secondary outcomes. That is, by creating a safer, less violent environment at school it is plausible to expect a reduction in school dropout and also an increase in academic performance because learners and staff will not be disrupted by violence and the negative effects of being exposed to violence. Similar to other individual and group intervention programmes, we hope that the effects of violence prevention efforts would generalise to youths' other environments. Also, the school may become an example and inspiration for the families of learners and the community, which may experience the benefits of a decrease in school violence. School-based violence prevention thus has the potential to make a contribution to crime prevention on a larger scale by nurturing youth to become prosocial members of society.

DEVELOPING SUCCESSFUL SCHOOL-BASED INTERVENTIONS

Although most learners report that they learn about safety in various types of school programmes (Burton, 2008) and the new life orientation curriculum is being

implemented, the levels of violence are still high, suggesting that the current efforts are not producing the desired results. Therefore, innovative violence prevention programmes need to be developed and implemented in schools. However, there are no well-developed, evidence-based guidelines for fulfilling this need.

The implementation of effective interventions always demands careful consideration of several factors during the development phases. Given the low resources of most South African schools and the country as a whole, a thorough development phase is particularly prudent to ensure careful use of scarce resources for programmes that are most likely to be effective. Although we have empirical evidence to guide decision-making at certain points, the unique and dynamic contexts within which a particular intervention is to be implemented must be taken into consideration and drive certain decisions particularly when there is little research to provide direction on particular issues.

Countries around the world struggle with issues of school violence to various extents and various programmes and projects have been instituted to address these issues. However, the global evidence-base for interventions targeting school violence at the primary and secondary school levels is under-developed. Nevertheless, we encourage researchers and practitioners alike to survey the existing work in order to inform current intervention development and implementation efforts. Indeed, several types of school violence prevention interventions have been established as efficacious and effective (e.g. Howard, Flora & Griffin, 1999; Olweus, 2005). The Olweus Bullying Prevention Program (OBPP) was developed and extensively evaluated in Norway in the 1980s and again in the 1990s (see Olweus, 2005 and www.olweus.org). The successes documented among Norwegian youth were replicated among American youth when OBPP was first systematically evaluated in the U.S.A. in the mid-1990s (see Limber, 2006 for an overview) and is currently advertised for implementation in schools around the U.S.A. (see www.olweus.org). In a review of published school-based violence-prevention programmes in the U.S.A. that used classroom-based intervention strategies concluded that modest effects were found in changes in learners' knowledge, attitudes,

violent behaviour, and prosocial behaviour (Howard, Flora & Griffin, 1999). In addition, programmes that included a focus and intervention on the broader school environment, particularly at the primary school level, were more likely to be successful in violence prevention (Howard, Flora & Griffin, 1999). However, the levels of evidence from the studies in the review vary, making comparisons and strong conclusions difficult. The review authors' conclusions are similar to the recommendations we make in this chapter with regard to encouraging multi-level (or whole school), comprehensive programmes and outlining several common factors in successful programmes (see Box 1). These factors are based on existing evidence and thus should be regarded as a working summary and flexible guidelines that should be adapted to specific contexts and evolve as our understanding and the evidence-base grows. Though we would encourage local researchers and practitioners to draw on international research and programmes, we believe that even the best interventions need to be adapted to some extent to the local context or they may not be effective. Indeed, several researchers have suggested that contextual factors, such as levels of domestic violence and hate crimes in the community, have an impact on school violence, and therefore should be integrated in school violence intervention programming (Culley, Conkling, Emshoff, Blakely & Gorman 2006; Horton, 2001). The local body of research and available programmes is growing, which is an invaluable resource in addressing school violence. The following discussion offers some suggestions and topics for consideration when adapting or developing a school-based intervention for violence prevention.

The Pan American Health Organisation (PAHO) offers a useful model for youth intervention development that promotes a multi-sectoral approach that spans across the individual, family and interpersonal, community, and policy levels (Breinbauer & Maddaleno, 2005). School-based youth violence prevention interventions can be implemented at several levels – individual (programmes that aim to change individual youth's behaviour), interpersonal (programmes that aim to change behaviour of those in youths' immediate environment such as peers and family), community (programmes that aim to change the community's behaviour, including school and school staff change), and policy (programmes that aim to change policies and legislation within

schools, locally, nationally, or internationally). Programmes may address only one level; however, a multi-level approach strengthens programmes as the messages are consistently and continuously delivered throughout youths' environments and are thus more likely to be adopted by youth (Breinbauer & Maddaleno, 2005; Culley et al., 2006; Dawes & Donald, 2000;). Further, because youth violence in schools has a complex aetiology and presentation, singular approaches are unlikely to make significant, long-term impacts, as all contributory factors need to be addressed such that youth violence is no longer supported at any level and policies and programmes actively support more prosocial norms. The composition of the programme development and implementation team may aid in creating a multi-level intervention.

A multi-disciplinary team is not only likely to generate creative approaches to youth violence prevention, but team members can integrate these programmes with the various sectors they represent. The team should include representatives from all the stakeholder groups, such as school administrators, educators, and learners. Particular attention needs to be given to the voices of the learners because they are most closely involved in school violence (Dawes & Donald, 2000). The team would also benefit from dialogue between researchers and practitioners in terms of consulting empirical evidence, translating this evidence into clinical action, and evaluating the programme in order to continuously improve it and disseminate it. Ideally, leaders from various sectors would come together to collaborate and coordinate efforts within the school and across sectors in school violence prevention.

It is useful to consider the characteristics of violent and non-violent schools when developing a violence prevention intervention in order to identify a particular school's strengths and vulnerabilities. Violent schools are characterised by high levels of distrust between educators and learners; high truancy rates; low learner commitment to the school; unclear and inconsistent discipline policies and procedures; high levels of physical punishment and low levels of praise or positive reinforcement; high levels of conflict among learners and between learners and educators; and learners are often low achievers and come from socioeconomically disadvantaged backgrounds (Burton,

2008). In contrast, effective and appropriate classroom management; a focus on academic work; a high level of task orientation; thoughtful and effective use of praise and appropriate punishment, and high levels of student participation in the school that create and maintain a sense of belonging for all are some of the common characteristics of more successful, non-violent schools (Burton, 2008; Khan, 2008). Successful schools have strong, competent leaders who inspire all those involved with the school to make a positive contribution consistent with the central school vision and collaborate in innovative learning throughout formal and informal school activities (De Jong, 2000). A stable staff who are proactive and take responsibility for implementing the school's vision in all their activities and share good relationships between themselves and with learners will make a significant contribution to making a school successful (De Jong, 2000). Successful schools generally employ innovative and on-going staff and learner development programming that allows for personal and professional or academic development (De Jong, 2000). The policies and procedures of successful schools are clearly communicated to the entire school community and reflect the school's vision and a learner-centred approach and staff are positive role models for and supportive of learners, particularly those experiencing any variety of difficulties (De Jong, 2000). Finally, the success of a school is greatly enhanced by having positive, reciprocal community involvement and adequate funding (De Jong, 2000). School-based violence prevention interventions should aim to minimise or eliminate risk factors as well as build assets as a singular focus on risks is unlikely to achieve the safe, healthy, and vibrant school environment that youth should have.

School-based violence prevention programmes can take many forms; however, successful interventions for youth share some universal characteristics. These qualities (see Box 1) should play a guiding role in violence prevention programme development in order to increase the likelihood of programme success. Although many prevention programmes are conducted in groups and are successful in such a format, some learners may require individual attention, so facilitators need to be aware of these unique needs of individual learners in any school (Flisher et al., 2000). Skill development is fundamental to a successful school-based intervention and such

development should include both providing knowledge and practicing the skills and applying them to several situations (Flisher et al., 2000).

Two other issues that demand consideration during intervention development are the approach and content of the programme. The approach continuum spans from whole school development on the one hand to discrete programmes on the other. Whole school development refers to an approach that involves all aspects of a school such as learners, educators, administrators, the curriculum, policies and practices, and the structure. This approach intervenes at multiple levels of the school and can thus be considered to fulfil the PAHO model ideal of multi-level programming in adolescent health and well-being interventions. The broad goals of whole school development are to improve the quality of the experience of people within the school and also to improve the way the school functions (De Jong, 2000). The primary concerns of the school, such as high levels of violence, are prioritised such that the actions taken will improve the school's response to these problems as well as prevent future occurrences of these problems. Whole school development effects change in the entire school and the environment that contains the school, including all individuals and groups within these contexts and redefines the school "as a Community Learning Centre" (Mouton 2000, p.134) with active positive relationships between all stakeholders within and around the school (Mouton, 2000). Such a project demands change and accountability of all people in all components of the system such that every component coordinates to create and sustain the positive changes that the project aims to influence (Mouton, 2000). If external agencies are involved in the initial phases of a whole school development project, issues of sustainability need to be carefully considered; therefore, capacity building should be a priority so that staff are given adequate training to continue the programmes, and communities are empowered to continue building a strong, safe schooling environment (Mouton, 2000). The Thousand Schools Project faced significant implementation and sustainability issues (Mouton, 2000) highlighting the need for ongoing energy to implement, evaluate, and modify whole school development programmes and the importance of strong collaborations to maintain these efforts. A whole school development project assumes an ongoing process and not a time-limited

intervention as the social system and environment of and around the school is constantly changing and the school will need to be a dynamic part, indeed a leader, within this process which may inspire community change (De Jong, 2000). Thus, a whole school development project introduces continuous and systematic evaluation processes into a school and the insights from these evaluations are then translated into action steps to make changes in areas that are not functioning optimally (De Jong, 2000).

Because school violence is a complex problem that involves all levels of learners and school staff as well as the school's infrastructure and policies, a multi-sectoral collaboration for whole-school development would be ideal and has the potential for positively influencing families and communities and creating safety for youth in all of these environments. However, a lack of resources or 'buy in' from key stakeholders may make such an approach difficult or impossible. This case, although disappointing, is not cause to give up because specific, independent school-based programmes have been shown to be effective in violence prevention. Discrete programmes are interventions aimed at a particular aspect of the school such as learner programmes (e.g. conflict resolution skills), educator programmes (e.g. classroom management skills), or structural changes (e.g. access control). Should such a programme approach be chosen, consideration should then be given to the target group. That is, will all pupils receive the intervention or only specific groups? Consider that if the intervention aims at increasing the use of particular skills, how likely are participants to do so if they are only a subset of the school population who may not know of or support the use of such skills (Multisite Violence Prevention Project, 2004)? If learners and staff alike are included in interventions, there is more likely to be a change in the school environment as peers and educators model appropriate behaviour reinforcing and supporting the intervention goals (Multisite Violence Prevention Project, 2004). Scheduling and location issues also need to be considered well in advance of implementation.

The content continuum spans from comprehensive programmes that address a host of risk behaviours to specific programmes that address only a particular risk

behaviour (e.g. peer violence). To date there is no research or peer-reviewed article addressing this decision, even though intervention researchers make it for every project they investigate. Both types of programmes have been found to be effective in various circumstances. Although much of the local school violence literature strongly encourages comprehensive programming, there is no evidence to indicate that specific interventions are less successful.

When these two continua intersect, four conceptual quadrants are formed. Intervention programmes can be located in one of these four quadrants. The advantages and disadvantages of the type of approach and content combination need to be carefully considered (Table 1). We have used this heuristic to organise discussions about school-based youth violence prevention interventions in the following section.

SCHOOL-BASED INTERVENTIONS IN SOUTH AFRICA

In South Africa, youth violence in schools is a concern receiving much attention. Various efforts have been directed toward preventive interventions; however, little research in South Africa and globally has systematically evaluated various programmes, and there is little consolidated effort to address this significant concern. Although we do not want to discourage individual projects aimed at youth violence prevention, a survey of the current situation indicates that a more unified approach through inter-agency, inter-departmental, and multi-sectoral collaboration is needed to most effectively address the issue of youth violence in South African schools. In this section we will discuss various South African school violence prevention projects and make suggestions for future work.

Comprehensive, Whole School Development Programme

As mentioned earlier, whole school development is a collaborative, multi-sectoral effort that creates change at all levels, systems, and groups of the school and, ideally, within the environment surrounding the school. When creating a safe and healthy school in this way, there are several areas of intervention that need to be considered.

The school infrastructure plays a significant role in the safety of a school. Thus, security measures such as adequate perimeter fencing, security guards, and access control as well as improvement of school buildings by replacing or repairing broken facilities, and keeping the campus clean and greener to make it welcoming to staff, learners, and parents are part of violence prevention work (De Jong, 2000). Collaborative relationships within and between all stakeholder groups (educators, administrators, staff, learners, families of learners, and management) in the school will make significant strides in building a safe and healthy school environment and preventing school violence. Positive relationships rest on mutual respect and a caring culture facilitated by better communication, greater tolerance, and team spirit, which all contribute to a friendlier atmosphere and supportive, prosocial environment for everyone (De Jong, 2000). A mentoring programme will help to establish and maintain such relationships, particularly when newcomers join the school in any of the groups (De Jong, 2000). An inclusive approach to implementing a whole school programme is essential so that all stakeholders play an active role in developing new school policies and procedures; a French school using this approach experienced a 60% decrease in violence and a 50% decrease in verbal abuse (Khan, 2008). Perhaps one of the biggest changes that schools undergo is the shift from being authoritarian to democratic (Khan, 2008).

A comprehensive, whole school development programme was implemented at a primary school in the Cape Peninsula (Flisher et al., 2000). This school experienced the negative sequelae of high levels of gang activity around the school and in the learners' neighbourhoods. The project identified several goals and formed several interest groups (e.g. drug abuse, teenage club, nutrition project, teacher support group) who then identified and implemented specific programmes to meet their group-specific goals that served the overall aim of creating a safe and healthy school. These groups worked together such that their messages would be consistent and there was a symbiotic relationship between all the groups and their programming. In addition to these programmes, the school incorporated health-promoting messages throughout the curriculum, created collaborative relationships with parents, and throughout the process consulted with all stakeholder groups related to the school system. The entire project

was evaluated using multiple sources of data and several strengths and advantages were identified as well as some weakness that could be addressed in future projects. Specifically, there were gains in terms of interpersonal relationships within and between educator, learner, and parent groups, positive skill development for educators and learners, and more positive attitudes in educators and learners. However, some difficulties were experienced in motivating all educators and parents to become involved and stay involved, particularly with the already high workload of both of these groups independent of this project (Flisher et al., 2000). The programme is considered comprehensive because it addresses several risks and strengths and because interventions were implemented across various levels of the school, it can be considered a whole school development approach. This programme has many features of a successful intervention as outlined in Box 1. The programme may have benefited from more structure, particularly within each of the interest groups to ease implementation of various activities. Although it is certainly an asset to have this programme very specifically mapped onto this school's issues, it is difficult to generalise the programme or the findings to other sites. Nevertheless, this school may serve as an example and consult with other schools wishing to implement a comprehensive, whole school development programme.

Comprehensive, Discrete Programme

Comprehensive violence-prevention programmes, by definition, address a broad spectrum of issues related to violence. Some of these programmes may not seem to address violence directly although the outcomes of the programme include a reduction in violent behaviour among youth. One such example is the *Healthwise* intervention, which seeks to reduce risk behaviours in youth by targeting youth leisure boredom (Caldwell et al., 2004). This individual level program is delivered to learners in various contexts, including the school and the community such that the messages are consistent and repeated and the behavioural outcomes are supported in various contexts with which youth regularly interact (Caldwell et al., 2004). By targeting a single group within the school environment (learners), this programme would be considered discrete as it does not address multiple aspects of the school environment. Through

various activities, youth learn and practice inter-and intra-personal skills to make health-promoting decisions, manage their emotions appropriately, resolve conflict effectively, and overcome boredom by choosing positive leisure activities at school and in the community (Caldwell et al., 2004). No specific school violence-related data following this intervention were collected during the pilot-testing phase of the programme; however, post-intervention measures indicate a decrease in risk behaviours, including sexual behaviour and substance use. Results from a large-scale randomised control trial are awaited to ascertain the strength of the evidence supporting this intervention. Most of the features of successful prevention interventions (Box 1) have been met by this programme, suggesting that there is a high likelihood, supported by data from the pilot test, of success in preventing youth risk behaviour.

Youth violence prevention programming does not only target youth. Early intervention programmes that aim to prevent youth violence by working with young children with behavioural difficulties have been used in South Africa. Conduct problems are extensive in South Africa, particularly among male youth growing up in poor communities (Petersen & Carolissen, 2000). It is particularly important to mobilise resources for early intervention prevention efforts in high-risk groups such as by adapting programming to be delivered in schools by teachers. Most early intervention programmes focus on parent training, which, although generally helpful according to multiple large empirical investigations in developed countries, may not be most successful in under-resourced communities where children are surrounded by several risk factors (Petersen & Carolissen, 2000). Therefore, such programmes need to be expanded to address other risk factors in the child and other close environments such as peer groups, school, and neighbourhood of the child's family; indeed, it is combined approaches that have been found to be maximally effective (Petersen & Carolissen, 2000). Faced with these challenges, researchers adapted the Webster-Stratton programme for a community-based project implemented in the Western Cape with aggressive preschoolers (Petersen & Carolissen, 2000). With the aim of changing these preschoolers' current behaviour in order to prevent long-term conduct problems, training was provided for parents and teachers, including supports for each of these groups and

between the groups (Petersen & Carolissen, 2000). On the approach continuum, this programme would fall closer to the discrete type than whole school development. Groups of parents, children, and teachers met separately for eight weeks; the parents and teachers met at a central community location while the children met at school (Petersen & Carolissen, 2000). Parents learned parenting skills, received information about child development in order to understand their children's behaviours, as well as receiving support from other parents and the facilitators. Teachers learned positive behaviour modification strategies particularly for classroom management and received support from fellow teachers and facilitators. In the child group activities were focused on introducing rules, rewards, and consequences, and learning prosocial skills, emotion regulation, anger management, and basic problem-solving. This programme, implemented at two preschools, was compared to two similar, control preschools who did not receive the intervention. Evaluation data were collected in the form of interviews and relevant commonly used instruments measuring preschoolers' behaviours, parenting stress, and teachers' self-perceived competency. Results from parent and teacher ratings of preschoolers' behaviour indicated a reduction in aggressive behaviour. In addition, parents and teachers reported increases in their competence to manage behaviour appropriately and effectively (Petersen & Carolissen, 2000). Given the success of this programme, researchers should consider developing a randomised controlled trial to build a strong evidence base for the intervention in order to disseminate it more widely. Already this intervention has several characteristics of a successful programme, including multiple components, early intervention and appropriate timing, building knowledge and skills, some social support by bringing groups with similar challenges and interests together, and the potential for continuous multi-method evaluation. Several of these features could be strengthened and building collaborative relationships with several stakeholders as well as manualising the programme will contribute greatly to a sustainable, successful programme.

Specific, Whole School Development Programme

Following the National Schools Violence Study, which assessed the levels and nature of violence in South African schools, several recommendations were made on

how to make schools safer and less violent (see Box 2; Burton 2008). These recommendations cover a wide range of interventions from school-based programming, updating school infrastructure, to community development and services for families and young children which all address some aspect of the complex aetiology of school violence. Together, these recommendations may be considered a blueprint for a whole school development programme specific to violence prevention.

The Centre for Justice and Crime Prevention (CJCP) in collaboration with the Department of Education has initiated the Hlayiseka Early Warning System (Khan, 2008). This system was informed by a review of data on school violence and the current functioning of South African schools. This programme provides a toolkit for school management that guides step-by-step school-wide changes to address violence. An initial diagnostic tool is used by the school to get information from all stakeholders regarding safety concerns and steps are taken to meet the minimum standards for school safety before continuing to the next steps. Subsequent learner and educator surveys furthers a democratic and consultative management style and acquires information on the nature and extent of violence from key stakeholders such that the management team have a thorough understanding of the situation they are facing. With this information the school develops a comprehensive safety plan and forms partnerships with community and government departments particularly to coordinate school-based interventions and other safety-focused services. An integral part of this plan is establishing confidential systems of reporting and recording incidents of violence as well as continuous monitoring of changes in order to maintain school safety. The toolkit is flexible, allowing it to be adapted to every school's unique situation (Khan, 2008). This project is currently being implemented at selected schools nationwide (CJCP, 2008). By targeting violence only, this programme would be considered to be specific on the content continuum. The programme seeks to assess and implement changes at all levels of the school indicating that it uses a whole school development approach. Common to most successful interventions, the Hlayiseka programme has multiple components, is socioculturally sensitive and relevant, is appropriately timed, and has the potential to incorporate other features such as positive role models,

knowledge and skill building, structural support for interventions at all levels, including a clear plan for implementation.

Similar to the Hlayiseka project, the Western Cape Education Department (WCED) has implemented a Safe Schools programme aiming to create learning environments that are violence-free, crime-free, and safe for learners, educators, and other school staff (WCED, 2003). The programme aims to create such an environment by targeting three broad areas: school infrastructure; knowledge and skill development programmes and counselling services for learners, educators, and parents; and organisational development and collaboration between the school and other government and non-governmental or community-based organisations. Schools are guided by a nine-step process, which includes formation of a Safety Committee, integration of safety in the school's priorities and vision, conduct a safety audit of the school, identification of areas for intervention, selection and implementation of interventions, and evaluation of the effects of such programmes. A procedural manual detailing areas of and procedures for intervention for the Safe Schools project is available. The WCED has established the Safe Schools' Call Centre, which schools and/or learners can call to report violence and request supportive services such as counselling or trauma debriefing. Although this project has collected descriptive information about the various aspects of schools and their environments, there has been no rigorous evaluation of the effectiveness of the Safe Schools project.

Specific, Discrete Programme

Unfortunately, there are no specific, discrete violence prevention programmes that have been evaluated in South Africa to our knowledge. Therefore, we will discuss examples of the types of programmes that may fit into this quadrant in the context of youth violence prevention in South African schools. Infrastructure development projects such as fencing, access control, and appointing security guards for the school premises would be considered specific because they aim to prevent violence in the school and discrete because they target the school grounds only. Seminars on effective, positive classroom management skills for teachers would be another example of a discrete

violence prevention intervention. Similarly, a conflict resolution skills workshop for learners would be located at the intersection of the specific content and discrete approach continua. Although we believe that several such projects are being implemented in South African schools, they are not being evaluated or made public in order to share successes with other schools. This lack can be remedied fairly simply by identifying and evaluating existing programmes or adapting international programmes of this type for the local context. Even with the interventions in the other three quadrants, there is a need to develop strong programmes within the specific, discrete programme quadrant for youth violence prevention in South African schools.

Regardless of the programme type, we believe it of utmost importance that prevention programmes be synthesised and a body of strong evidence be built around them such that efforts can be coordinated in an efficient use of resources and with the most effectiveness. School-based interventions can also not be the sole responsibility of the school, so we urge schools and community organisations to form collaborations to best address the problem of youth violence in schools and throughout society. Individual time-limited discrete programmes are unlikely to result in strong, long-term reductions in violence among youth, but in the absence of programmes that use a whole school development approach they do make a positive contribution to the reduction of youth violence. Ideally, whole school development interventions should be coordinated across all developmental stages ranging from early childhood to late adolescence and the transition out of the school environment. Consistency and multi-level support are key to successfully reducing youth violence *and* promoting youth health and well-being.

POLICIES ADDRESSING YOUTH VIOLENCE

Policy-level interventions can be implemented in various local, national, and international arenas. Individual schools can devise and implement policies that are consistent with the policies of the provincial and national government. Various efforts have been made at the policy level in an effort to address the problem of school violence in South Africa; however, a national policy specific to school violence has not

yet been created. In this section we will discuss examples of policies that are relevant to youth violence prevention. An important factor to note in this discussion is that even the most carefully crafted policies are unhelpful if they are not properly implemented with adequate support across multiple sectors.

The policy guidelines for youth and adolescent health emphasise the importance of preventing health problems in youth and promoting optimum, all-round health in all youth (Department of Health, 2001). Although these guidelines do not address the issue of youth violence directly, this issue can be considered part of the broad concept of adolescent health and well-being or a risk to it. Indeed, these policy guidelines identify violence as a youth health priority. Many of the areas for and characteristics of successful interventions that we have discussed in this chapter are also noted in the policy guidelines for youth and adolescent health in South Africa. The Child Care Act protects the fundamental rights of children, including making violent acts against children illegal and mandating that child abuse of any kind be reported to either the police or child welfare. With this reporting system it is hoped that victims and perpetrators receive appropriate services. Specific to education, the recent South African Council of Educators Act of 2000 legislates professional licensing and ethics for educators (Human Rights Watch, 2001). An amendment in 2000 to the Employment of Educators Act of 1998 requires that teachers guilty of serious misconduct, including sexual assault of a learner or having a sexual relationship with a learner, be dismissed (Human Rights Watch, 2001). The South African Schools Act of 1996 sets forth that learners found guilty of serious misconduct (to be determined by local governments) can be either suspended or expelled from the school (Human Rights Watch, 2001). These two Acts, if enforced, contribute to creating safe, non-violent schools. The National Programme of Action for Children is charged with integrating all policies and projects by all government departments and NGOs that promote youth well-being, and this programme has the potential to make significant differences in school violence prevention programming (Biersteker & Robinson, 2000).

Another policy-level intervention is evidenced in the Department of Education's introduction of significant revisions to the curriculum in 2006 to improve the education of South African youth. This revision not only introduced a new structure and new content, but also encouraged a new quality of teaching that was more innovative, less reliant on textbooks, more learner-centred, and more relevant, with emphasis on learning general life skills throughout the curriculum and particularly in the Life Orientation component of the curriculum (Department of Education Website, 2008). This new style of teaching and learning aims to engage learners more and facilitate a positive relationship between learners, learners and teachers, and learners and the school. As discussed earlier, such positive relationships help combat youth violence in schools. Further, this type of approach to teaching closely mirrors the type of collaborative, interactive style recommended for interventions (Box 1). Although the content of the Life Orientation does not directly address violence, it does aim to build skills, knowledge, values and attitudes that will guide decision-making and pro-social actions within the domains of health promotion, social development, personal development, physical development, and career orientation (Western Cape Government, 2008). Life Orientation also provides an opportunity for an intervention team to implement a particular component of a violence prevention programme.

CONCLUSION

Levels of school violence in South Africa are unacceptable and stripping youths of their need for and rights to a safe and secure school environment. The need to intervene with support and prevention programmes has not gone unnoticed and several programmes have been implemented in schools and communities around the country. In addition, several policy-level initiatives relevant to youth violence prevention have been implemented. We have recommended a comprehensive, whole-school approach to coordinate programming to prevent violence in schools in collaboration with organisations and leaders from multiple sectors. We believe that such programmes may have a wide-reaching effect such that youth and school outcomes will improve, and violence in other contexts will decrease.

Despite the high levels of violence, schools should not only be seen as a high risk environment because they simultaneously provide youth with several factors that promote their resiliency. Thus, school-based violence prevention programmes should aim both to strengthen these positive factors and to minimise the factors that endanger learners and educators. When developing school-based violence prevention programmes it should be noted that school violence does not occur in isolation, it intersects with many other problems that also occur within the school context, including the distribution and use of drugs, alcohol, and weapons, and these issues need to be addressed concurrently. Within this programme development, there should be several methods of evaluation to monitor and assess the programme and its impact. This research will also build up the evidence base to better inform future work in this area.

Given the importance of education in reducing such widespread social problems as poverty, hunger, and mental ill-health (Townsend et al., 2008) we need to create schools and school environments that are places of creative and innovative learning and development for youth. The first step towards doing so is making sure that schools are safe places, free of any sort of violence or discrimination. The long-term implications of inaction on this issue are gravely concerning as we put our society at risk for escalating violence and widespread disorder. School violence is a manifestation of a general lack of respect for individuals and human rights and therefore, what is needed is a change in orientation to a more human rights-committed culture (Burton, 2008; De Jong, 2000). In creating such a culture youth must not only become aware of their rights and how to protect them, but also the responsibilities that come with their rights (Burton, 2008). Schools are an excellent arena to begin such culture change because they are one of the primary socialisation agents in our society and thus, have a large influence on the majority of our youth from a very young age. However, such a change cannot be optimally successful if schools are left to do it alone. Such a change, particularly one that deserves such urgent attention, needs the collaboration of multiple sectors of our nation at every level.

Box 1. Characteristics of successful prevention interventions (Breinbauer & Maddaleno, 2005; Kutash, Duchnowski & Lynn, 2006; Nation et al., 2003; Remschmidt, Nurcombe, Belfer, Sartorius & Okasha, 2007).

Successful interventions:

- Are active collaborations between several sectors, including adolescents, families, schools, communities, and policy-makers throughout the planning, development, implementation, and evaluation stages;
- Contain multiple components within the programme such as learner-only groups, educator-only groups, parent programmes, family activities, and community engagement and opportunities;
- Are socioculturally sensitive and relevant:
 - The programme reflects local prosocial norms, values, and beliefs without colluding with systems of discrimination and oppression;
 - The programme addresses contemporary youth issues;
- Are delivered using interactive and collaborative methods:
 - Various types of developmentally appropriate methods are used to convey information, build skills, and address issues to engage youth and educator to promote behaviour change beyond the school setting;
- Target early stages before problems have become entrenched;
- Are appropriately timed in terms of developmental stage, fitting in to the school, youth, staff, family, and community schedules and lifestyles;
- Are clearly structured for ease of implementation and to facilitate fidelity to the model while still allowing for creativity, flexibility, and adaptability to effectively deal with unexpected issues and for future generalization to other populations and contexts;
- Have adequate structural support:
 - Respected and trusted staff are carefully selected, trained, supervised, and supported to implement specific interventions of the programme. These staff members do not necessarily need to be mental health professionals and programme implementation does not need to be the sole role in the community;
 - Other staff and community leaders are aware of the programme and support it by promoting the same goals and offering structural support as they can;
 - Manuals for facilitators and programme leaders and newsletters for organizations, families, and community members may be helpful in terms of treatment fidelity and encouraging multiple sectors to support and become actively involved in the programme;
- Are implemented consistently, ideally across sectors, and at an adequate dosage (length and intensity of sessions and whole programme, booster sessions or ongoing programme);
- Undergo continuous, multi-method evaluation to ensure ongoing quality improvement, sustainability, and generalizability;
- Increase knowledge and build specific skills applicable in various situations;
- Incorporate positive role models or mentors to model and engage youth in supportive relationships with their peers, educators, caregiver/s, community leaders, or other authority figures;
- Are based on specific theories.

Box 2. Recommendations for school violence prevention programming (from Burton, 2008):

- The Department of Education should monitor schools' adherence to minimum safety standards and efforts at preventing and responding to school violence particularly by collecting regular data on school violence and prevention programmes.
- School policies and procedures, including a detailed code of conduct, promoting non-violence and setting out appropriate responses and consequences for violence in accordance with Department of Education's minimum standards of safety need to be implemented and clearly communicated to all those within the school community.
- School staff need to be taught and supported in effective and appropriate classroom management and be held accountable for violence within the schools by enforcing school non-violence policies with appropriate means and any staff who perpetrate violence in the school need to be swiftly and decisively disciplined.
- A whole-school development approach involving all groups participating in all the school's systems is indicated by the complex and pervasive nature of violence in schools.
- Security infrastructure at schools needs to be updated, maintained, and monitored to keep the school premises safe and secure.
- Through collaboration with the SAPS, Department of Social Development, and local government as well as school and community initiatives, the environment surrounding schools should be cleared of drugs, alcohol and weapons and safe transit to and from schools needs to be established so that learners and educators have access to reliable, safe, and affordable transport between their homes and the school.
- Although early intervention is key to youth violence prevention, programmes should also be targeted at adolescents. Early childhood development programmes should be implemented to teach children pro-social behaviour and social competencies, including assertiveness training, conflict resolution, anger management skills, and self-control from a young age and these lessons should be reinforced throughout children and adolescents' schooling.
- Parenting interventions should be provided to families in collaboration with the Departments of Social Development and Health to teach parents appropriate methods of discipline as well as facilitating their child's pro-social development.
- Also in collaboration with the Departments of Social Development and Health and local NGOs, children and youth experiencing violence in the home or community need to be identified and provided with appropriate support services, including counselling.
- Planned, coordinated, and consistent extramural activities should be organised to involve learners in positive leisure activities after formal school hours such that their exposure to gangs and opportunities to engage in violent or other criminal behaviour are reduced. Such activities may take place within the school buildings and include sports, drama, entrepreneurship programmes, or other cultural activities. It is particularly important to get youth input when designing such programmes and be sure to make them available throughout the year and accessible to all youth.
- All youth violence prevention programming whether school-based or within another context need to be consolidated and linked not only for cross-programme support, but also to ensure that a consistent message is conveyed and the limited resources are being used most effectively.
- Research efforts need to be increased so that programmes are effectively monitored and evaluated to inform programme improvement and generalizability to other schools.

Table 1. Advantages and disadvantages of programme content and approaches

		APPROACH	
		Whole school development	Discrete
CONTENT	Comprehensive	<p>ADVANTAGES</p> <ul style="list-style-type: none"> • Several risk behaviours and their correlates are addressed at multiple levels within the school environment • Changes are likely to be maintained in the long-term and positive behaviours become the norm as all systems implement and support the programme • Relevant to all participants regardless of risk status <p>DISADVANTAGES</p> <ul style="list-style-type: none"> • May be costly • Demands the cooperation and buy in of many groups • Change may be slow • Programmes may be too general and not address specific skills needed for change 	<p>ADVANTAGES</p> <ul style="list-style-type: none"> • By addressing a common aetiological factor, several problems may be averted • Evaluation and accountability of the programme may be enhanced because it is a contained entity • Simpler development and planning than a whole school development approach • Schools may be more open to agencies coming in to implement such programmes rather than attempting to change everything about the school <p>DISADVANTAGES</p> <ul style="list-style-type: none"> • The social ecology of the school is not mobilised to engage in or support the changes that the programme is promoting • More resources are needed in comparison to specific programmes and additional resources may need to be accessed if the programme is not able to share resources with various school departments
	Specific	<p>ADVANTAGES</p> <ul style="list-style-type: none"> • More time and resources can be targeted at more proximal, rather than general, risk factors • Every level of the school environment joins in the effort and reflects the changes that the programme promotes • Change is more likely to be maintained with many systems in the school environment reflecting the changes <p>DISADVANTAGES</p> <ul style="list-style-type: none"> • Various risk behaviours are related and by only addressing one form of risk behaviour, change may not be maintained if other systems are still supporting another risk behaviour that increases the likelihood of the target risk behaviour • All groups within the school have to agree with and be involved in the programme 	<p>ADVANTAGES</p> <ul style="list-style-type: none"> • Economical (relative to comprehensive and whole school programmes) • More attractive to funders • More time to address a specific problem in detail and to address risk factors specific to this problem • Positive changes in the targeted domain are likely • Relatively simple to implement and evaluate • Short term <p>DISADVANTAGES</p> <ul style="list-style-type: none"> • May be missing other important problems • Programme may need booster sessions to maintain effects

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CHAPTER 3

PREFACE

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Gevers, A., Jewkes, R., Mathews, C., & Flisher, A. (2012). 'I think it's about experience, like, life': A qualitative exploration of contemporary adolescent intimate relationships in South Africa. *Culture, Health & Sexuality*, 14(10), 1125-1137.

Conceptualisation:

I conceptualised and conducted the qualitative study described in this paper under the supervision of Prof. Alan Flisher and Dr Cathy Mathews. I conducted all recruitment at Cape Town area high schools. The focus group discussions were facilitated by me and three co-facilitators who I trained and supervised during data collection. I conducted all individual interviews, at times with the help of a translator. The data were transcribed by professionals and then coded by me using NVivo software. Professor Rachel Jewkes provided supervision during the data analysis phase. I wrote the full draft of the paper and made all subsequent revisions to it under the supervision of Prof. Jewkes and Dr Mathews who both approved the final draft that was submitted for publication (*Culture, Health, and Sexuality*).

Authors' contributions:

A. Gevers – protocol development, data collection, data analysis, writing full draft and all revisions of the paper
R. Jewkes – mentoring of data analysis, critical review of all drafts of paper
C. Mathews – review of protocol, critical review of all drafts of paper
A. Flisher – mentoring of protocol development

Additional motivation for inclusion:

This chapter addresses Objective 2 of the thesis and is presented in the format of a peer-reviewed journal article.

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University of Cape Town

CHAPTER 3

How contemporary adolescents’ conceptualise, engage in, and experience dating relationships at different ages

Title of publication:

‘I think it’s about experience, like, life’: A qualitative exploration of
contemporary adolescent intimate relationships in South Africa

Authors:

Aník Gevers, Rachel Jewkes, Cathy Mathews, and Alan Flisher

Abstract

Intimate or dating relationships play an important role young people’s psychosocial development and well-being. Yet, we know relatively little about how teenagers conceptualise and experience them. Research knowledge about young people’s intimate relationships is largely gleaned from studies whose primary focus has been on adolescent sexuality and violence. This study explored intimate relationships using qualitative data from 12 focus group discussions and 25 in-depth individual interviews with Grade 8 (mean age=14.6 years) and Grade 11 (mean age=17.2 years) young people recruited from Cape Town schools. Although there is overlap between these findings and previous research, this study delved into the microdynamics of teenagers’ relationship practices and conceptualisations. Their discussions gave insight into a nebulous dating landscape that is highly gendered and greatly influenced by peer relations. There was a heterogeneity of experience with relationships and sex. Implications for intervention development are discussed.

Keywords: adolescent; dating; romantic relationships; peer relationships; South Africa

Introduction

Research findings support the assertion that intimate or dating relationships among young people are developmentally normative and significant. Most teenagers participate in different types of such relationships and these early experiences have a significant impact on their psychosocial functioning and development as well as their later, adult relationships (Collins 2003; Natsuaki *et al.* 2009; Zimmer-Gembeck *et al.* 2001). Researchers in the US have found that between the ages of 12 and 18 years most young people engage in intimate relationships (Collins 2003; Sorenson 2007). Likewise in South Africa, a cross-sectional study of young people in Grades 8 and 11 in Cape Town found that 87% of respondents had been in or were currently in an intimate relationship (Flisher *et al.* 2007).

Young people identify intimate relationships as important, but also acknowledge that they sometimes find them difficult to navigate (Grover and Nangle 2003). A particular problem is intimate partner violence (IPV) – 16.4% of young people surveyed in Cape Town schools admitted to perpetrating physical violence against a dating partner (Flisher *et al.* 2007). Such violence is related to risky sexual behaviour and an increased risk of HIV-infection (Jewkes 2002; Jewkes *et al.* 2010b). In a context with a high prevalence of HIV and violence among youth, intimate relationships are an area of concern.

A review of contemporary research relevant to intimate relationships among South African youth reveals that most studies' primary focus is sexuality or violence and often participants are older teenagers. Few studies have put the intimate relationship at the core of the inquiry. It is essential to understand the nuances and complexities of these relationships themselves as a context within which young people may experience sex or violence especially to inform intervention programmes seeking to address sexuality, violence, and relationships with teens. In this study we examine the microdynamics of young people's relationships – how teenagers negotiate, shape, invest, and understand them – and then consider whether these views are congruent with the findings in the contemporary South African youth sexuality and violence literature and what the implications are for programme development.

Methods

Data were collected during 12 focus-group discussions (FGDs) and 25 individual, in-depth interviews (IDIs) with Grade 8 ($n=37$) and Grade 11 ($n=60$) students recruited from three schools in Cape Town. Grade 8 and Grade 11 students were selected in order to obtain a cross-sectional view of two points on the developmental spectrum of adolescence. Single sex FGDs were conducted for each grade at each school thus four FGDs were thus conducted at each school. School A ($n^{\text{FGD}}=24$, $n^{\text{IDI}}=7$) was an English-medium school with the highest annual school fees among the study schools. Students were predominantly Coloured and Black African and many commuted long distances daily. School B ($n^{\text{FGD}}=33$, $n^{\text{IDI}}=10$) was an English and Afrikaans dual-medium school with mid-range school fees relative to other study schools. Students were also predominantly Coloured and Black African, but lived in nearby low-income communities. School C ($n^{\text{FGD}}=40$, $n^{\text{IDI}}=8$) was an English-medium school with the lowest school fees in the study group. Students were primarily Black African, isiXhosa-speaking youth from very low-income families living in the nearby 'township' community.

All Grade 8 and Grade 11 students ($n=1031$) at each of the three participating schools were eligible to participate in the study. Letters describing the study in the three predominant languages of the region – Afrikaans, English, and Xhosa – were sent to students' legal guardians, who were asked to return a signed form if they consented to their student's participation in the study. At the insistence of school principals, school staff controlled the distribution of these letters and forms and the reminders to return them. The researchers were unable to track how many young people took a letter and consent form, how many showed this letter and form to their parent or guardian, or how many were given permission but did not return the form. Students were reminded by school staff to return their forms at least three times before data collection took place. Up to 10 participants of each sex from each grade were randomly selected to participate in FGDs from the group of students whose legal guardians consented to their participation ($n=103$). At the end of the FGDs, students interested in participating in an IDI were asked to provide their contact information. The group facilitators identified two to four potential candidates from the

group based on their participation in the discussion and their willingness to participate in an interview. A total of 28 students were selected, 2 students did not attend several scheduled meetings and 1 student could not be contacted.

Permission for this study was granted by the University of Cape Town's Health Sciences Faculty Human Research Ethics Committee, the Western Cape Department of Education, and school principals at each school. Participation was voluntary. Informed consent was obtained from legal guardians. Informed assent was obtained from participants in FGDs and IDIs. All participants were given a small incentive, a snack, and information about various help resources. No adverse events occurred during data collection.

Procedure

The 45-60 minute FGDs were conducted with groups of up to 10 students with 2 trained facilitators. In-depth interviews were conducted by the first author and a translator was present for interviews conducted with isiXhosa-speaking students. Facilitators used a flexible interview guide during FGDs and IDIs covering topics such as general ideas or experiences about adolescent intimate relationships (e.g., 'Tell me about relationships between boyfriends and girlfriends'), motivations and expectations, dating activities, sex, violence, substance use, influences, concepts of healthy and unhealthy relationships, and advice about intimate relationships. Participants in this study were open, willing, and enthusiastic to discuss their perspectives on these topics.

Data analysis

All FGDs and IDIs were audio recorded and then transcribed. Afrikaans and Xhosa transcripts were translated into English for coding and analysis. NVivo software was used to code and analyse data. A framework approach was used to code the data to initially group data by commonly discussed topics. Further coding involved identification of themes within these topic areas. Analysis involved identifying and interpreting thematic links between various topics (e.g., gender role theme in relationship initiation and dating activities topics) and comparing the themes and content of girls' and boys' reports grouped by grade. Throughout the report data

are co-identified by the age (e.g., grade 8 or younger versus grade 11 or older) and sex of the participants.

Participants

Female (n=53) and male (n=44) students participated in the FGDs. From these groups, 25 students (14 girls, 11 boys) – 14 Grade 11 students (age range = 16-20 years; average age = 17.2 years; n^{girls}=8) and 11 Grade 8 students (age range = 14-16 years; average age = 14.6 years; n^{girls}=6) – participated in IDIs. All names reported in this paper have been changed to protect participants' identities.

Questions were asked without specifying a sexual orientation or judgment on sexuality. Participants discussed only heterosexual intimate relationships; therefore, we acknowledge a heterosexual bias in this report. Participants were not obligated to disclose their personal relationship history or status; however, some chose to elaborate on their personal experiences. Two grade 8 girls and one grade 8 boy disclosed that they had never had a boyfriend or girlfriend. Two grade 11 girls described their current relationship in detail and two grade 11 boys mentioned that they decided not to be in an intimate relationship because of their previous experiences of being hurt and feeling that relationships required a big time investment. This report presents young people's discourse of how they perceive adolescent intimate relationships are or should be conducted.

Results

Gender

The influence of gender on young people's intimate relationships is evident from the very beginning of them. Participants agreed that intimate relationships were usually initiated by boys who would "*ask a girl out*" often via MXit (cheap cellphone text-chat service), SMS (regular text message via cellphone), a message passed via their friends, or, rarely, in person. Lina, a grade 11 girl, explained:

“The first step is you must ask each other out. No not each other. The guy must ask the girl out. But these days a girl can ask a guy out. But mostly its guys that ask girls out.”

Lina’s report, similar to many participants, indicates some flexibility in gender roles, but often these statements were followed by a preference for the maintenance of the gender status quo. Indeed, all participants reported that it was rare that a girl would initiate a relationship and Edwin, a grade 11 boy, commented that he would think it “weird” if a girl asked him out. Julian, a grade 8 boy, surmised that this gendered expectation was: *“...because, like, you see your friends ask the girl out. Or some boys would say they, like, take control of that relationship. You’re the man in the relationship and you show the girl, like, you’re not shy.”*

Edwin elaborated on the idea of an expected male role and an inherent capacity within boys accounting for this norm: *“that’s, like, the boy’s duty... because it’s like the boy is the strong person.”* Several girls echoed these sentiments saying it was “easy” for boys to ask a girl out. However, this idea was challenged by a group of grade 11 boys who confided: *“The girls think...it’s easy for a boy to ask a girl out, but I think it’s hard.” “All boys fear rejection.”* Even though boys experienced initiating relationships as difficult mainly because a girl could decline the advance, several girls reported that boys would not always accept a rejection. Lina explained: *“A girl can say no, but if a boy really loves the girl, the boy won’t stop until the girl says yes.”* She described that some boys bully or beat girls into accepting their proposition whereas others might send *“sweet SMSes or make a lot of promises.”* According to most participants, friends played an active role in the initiation of relationships often acting as intermediaries through whom communication about a potential relationship and advising on the suitability of a potential partner would be directed.

Although some older participants, particularly girls, described initiating a relationship through a series of discussions and interactions with a potential partner, they still ultimately relied on the boy to either ask them out or declare her his girlfriend. Irene, a grade 11 girl who shared the story of her current relationship, described an atypical negotiation process before she agreed to become involved in a relationship with her current boyfriend. Although she faced a great deal of pressure from her friends to begin a relationship with this particular boy, something commonly

reported, Irene heeded her feelings and instead asked the boy for some time to decide. She described:

"I decided to go to this new guy and talk. [He told] me all these things about girlfriends and relationships and how he was hurt by his other girlfriend, what he's looking for in a girlfriend. So I thought, ok, this guy is just like me 'cause he's just come out of a relationship...so we started talking a lot. There was communication. ...We didn't talk a lot, with the other one, so it was a new thing for me this talking... I told him we mustn't rush anything... I didn't want to do the things that I did with this other boy. I didn't want to hurt myself."

Older girls maintained that whether a relationship became either serious or casual depended mostly on the boyfriend. Older boys confirmed this view by saying it depended on what they wanted from the relationship or girlfriend. These boys reported that usually a quick progression to sex occurred in casual relationships whereas in serious relationships boys would be more patient about waiting to have sex and they would spend more time getting to know one another and discussing hopes, dreams, and struggles.

Reports about this type of personal disclosure varied. While some participants in each group described intimate relationships as ones in which a couple would share personal thoughts, feelings, and experiences, other participants, again across groups, maintained that they shared less with a dating partner than with a friend because they felt more comfortable with friends. One group of grade 11 girls explained: *"You don't really have to fake it with your friends."* *"With your friends you, like, be yourself...you must be more mature if you want a boyfriend."*

In contrast to the initiation of relationships, termination could be executed by either partner. According to the girls, boys most often terminated relationships whereas boys perceived that girls did so more often. Several girls and boys reported that girls were more likely to feel upset or hurt about a break up primarily because boys could easily find another girlfriend:

“The boy...will just, like, say it’s over without having any feelings or anything. Without thinking of how the girl feel. ... ‘Cause it’s almost like there are many other girls out there for the boys. It’s, like, easy for them to get.” (Nazeeya, grade 8 girl)

This description indicates a gendered differential in relationship investment and may explain girls’ perceived greater hurt – they invest more and thus lose more. Nazeeya described, “*break ups*” would be accomplished “*sometimes face to face, or over MXit, or sending a friend.*” These actions would signal a formal end to the relationship; however, many participants described that one partner may begin to ignore the other partner or they may begin to have less contact and thus the relationship would be assumed to be over. As found elsewhere (Jewkes and Morrell 2012; Wood and Jewkes 2001), several participants described that teenagers would not formally end relationships in case they wished to rekindle them.

Within a relationship, couples are faced with a variety of decisions about what, how, when and where they will engage in relationship activities. Almost all participants reported that decisions were made by both partners together, but their descriptions of decision-making behaviour contradicted this belief. Several suggested that many issues are not discussed and as such there is little collaborative decision-making. Curtis (grade 11 boy) said: “*You don’t actually decide. It’s just something that is spur of the moment. There’s no real planning.*” Girls’ and boys’ reports indicated that boys usually initiate relationships, contact during the relationship, and sexual behaviour. Older boys described that it was the boyfriend’s role to suggest an activity and the girlfriend’s role to accept or decline it. Indeed, older boys said that unless a girlfriend explicitly objects, they assume that she consents to the activity, including sexual activity. A few participants, primarily older girls, described discussing choices related to sex (mostly when to have sex) and future life choices with a partner. Previous research with youth in South Africa found that both girls and boys said that boys held the decision-making power in relationships (Harrison 2002; Harrison *et al.* 2001a).

Young people's reports reveal the highly gendered nature of their relationships, described in terms of expected roles and behaviours as well as a power differential favouring boys. Decision-making was not collaborative, but rather depended on an implicit process of boys initiating action and girls either accepting it or expected to explicitly refuse. Other studies in South Africa have similarly found that boys expect to play an initiator or leader role in a relationship while girls play a more passive role of accepting (or not-objecting) or declining advances including relationship initiation, relationship type, dating activities, and sexual behaviour (Harrison *et al.* 2001a; Harrison *et al.* 2001b; Jewkes *et al.* 2010b; Noonan and Charles 2009; O'Sullivan 2005).

Fluidity and lack of structure

Participants across age and sex groups described two main types of intimate relationships – serious or very close relationships, which were referred to variously as “*real*”, “*love*”, “*serious*”, or being “*stuck together*”, and casual or fling relationships, referred to as “*koppel*,” “*jolling*,” “*speening*” or “*playing*” (cf. Jewkes and Morrell 2012). Harrison (2002; 2008) similarly described these relationship types predominant in adolescent dating. The consensus among participants was that casual relationships were more common than serious relationships. Sizwe, a Grade 11 boy, explained: “*Boys our age are playing only, not having serious relationships where you love only one girl.*”

After relationships were initiated, participants were less clear about what constituted a relationship and commented “*I don't know really*”, as if they had not considered this question in detail before, and mentioned group and couples-only activities typical of girlfriend-boyfriend pairs within their peer group. Older participants reported communicating frequently via Mxit and spending time together as a couple at school, where many people met their partners. Younger participants reported less contact with intimate partners and more group than couple-only activities. A few participants in both age groups described that sometimes partners would do schoolwork together. Perhaps participants struggled to describe what constitutes a relationship because their relationships lack structure and are fluid,

especially among younger adolescents. In all groups participants' reports suggested that they seldom had formal, planned dates; however, some mentioned dating activities including going to the mall, the movies, or the beach.

Although relationship initiation is relatively structured, the ensuing relationship and relationship termination are significantly less so. The inherent informality of young people's relationships described by participants may undermine their ability to engage in collaborative decision-making, planning, and risk management.

Another theme prevalent in all participants' reports, echoing Harrison's (2002) earlier work, is that of multiple concurrent partners or "*cheating*" as several participants described it. Young people described typical scenarios where a person may have fleeting encounters, sometimes sexual in some way, but not ongoing relationships with other people while they are in an intimate relationship. There was agreement in girls' and boys' reports that boys are more likely to engage in multiple concurrent partners. Young people interviewed in KwaZulu Natal reported similar gendered patterns of multiple concurrent partners (Harrison *et al.* 2001a). However, interviews with adolescent girls in the Eastern Cape indicated that girls, too, engage in multiple concurrent partners (Jewkes and Morrell 2012). Although participants usually discussed multiple concurrent partners as a common occurrence in the adolescent dating domain, the majority of participants viewed multiple concurrent partners negatively similar to other adolescent girls who voiced a desire for monogamy (Jewkes and Morrell 2012). Indeed, "cheating" was a significant source of stress in relationships often causing arguments and feelings of distrust and hurt, and precipitating the ending of the relationship.

Sex

There was a prevailing perception among participants that most young people were sexually active, even by those participants who said that they and most of their friends were sexually inexperienced. Joanne, a grade 11 girl who confided that she had sex, said: "*maybe there's different reasons why teenagers have sex. Maybe to feel in or to be in a crowd and to please their friends.*" As with initiating relationships

and dating activities, boys were said to initiate sexual intimacy. Reports from girls in both groups, and similar to other work (Harrison 2008; MacPhail and Campbell 2001), suggested their common belief that boys expected to have sex or engage in non-intercourse sexual behaviours with girlfriends. Whereas some older girls disclosed their own position of sometimes wanting to have sex with a boyfriend, younger girls in the study all asserted not wanting to have sex, but feeling pressure to have a boyfriend and to become sexually active (also described in Jewkes and Morrell 2012).

Most boys asserted that while they did not always expect to have sex with a girlfriend, they often tried to “get” sex from girls. Several older boys reported sex as a goal of engaging in intimate relationships and described several strategies to achieve this goal including “sweet talking” the girl, getting girls drunk, organising opportunities to be alone with a partner, or initiating sexual behaviour such as kissing and progressing toward sexual intercourse unless the girl verbally objected. In contrast to the minimal communication about or planning for sex between partners that teenagers reported in this and other studies (Harrison *et al.* 2001b; O’Sullivan *et al.* 2006), older boys described peers helping them to devise plans to have sex such as by securing a private location. As found elsewhere in South Africa, peers were an accepted source of information about sex and contraception (Wood and Jewkes 2006).

Participants described the social status that accompanied both being in a relationship and being sexually active. As found elsewhere (MacPhail and Campbell 2001; Selikow *et al.* 2009), adolescents may experience explicit pressure from their friends or peers to have sex and implicit pressure to “fit in” to a peer group that is perceived to be sexually active. Nevertheless, participants unanimously reported that every person had a choice not to have sex and a group of grade 11 girls asserted that “*not everybody has sex.*” However, some participants elaborated that the consequences of this choice may differ. For example, a group of grade 11 boys reported that their friends would tease them if they chose to abstain (also found in MacPhail and Campbell 2001).

There was little agreement between participants about who in a relationship was responsible for contraception. In general, contraception, like sex, was said to be rarely discussed by partners, even if they were sexually active. In contrast Harrison (2002) found that both boys and girls agreed that boys were responsible for obtaining and using condoms. Only one participant, grade 11 girl Irene, described that she and her partner had agreed on a sexual health strategy:

"I told him that I was [HIV] negative and he told me that he was negative, but I told him there was no proof... And so we went [to the clinic] together. We still go together."

Irene's relationship was unique among the study participants in that she and her boyfriend discussed many issues openly that most participants reported avoiding.

Despite Irene's motivation to have a healthy relationship and implement safe sex practices with the support of her boyfriend, she said: *"I thought he was cheating the first time he told me that we must use protection."* She explained that she worried that his insistence on condom use meant that he was or would "cheat" or that he did not trust her. This association between condom use and distrust was commonly discussed by older participants who described the pervasive belief among young people that condom use was a sign of no or less trust and love between partners. This finding is supported by previous work with South African youth (Harrison 2008; Harrison *et al.* 2001b; MacPhail and Campbell 2001; Pettifor *et al.* 2005; Selikow *et al.* 2009).

Several girls' reports suggest a discourse of modesty around sex portraying abstinence as the most desirable option and suggesting high levels of coercion around sex. For example, they might have sex with a boyfriend because he wants to or because they feel it is expected and not because they want to have sex. Nevertheless older girls indicated their willingness to have sex especially to achieve their goal of having a committed boyfriend. Boys' reports promote abstinence to a

lesser degree and leave a greater impression of normative casual sex encounters. These reports are similar to findings in other studies with South African adolescents (Harrison *et al.* 2001a; Harrison *et al.* 2001b; O'Sullivan *et al.* 2006). If teens are having sex with an intimate partner then it is occurring within the fluid, amorphous, gender-inequitable types of relationships typical of this age group and this relationship context makes planning, decision-making, and communication about sex difficult.

Peer influence

Intimate relationships are an important part of adolescent peer group and social culture. Many younger and older teenagers feel pressure to become involved in relationships in order to “*fit in*” with and gain social status among their peers (Selikow *et al.* 2009). A group of Grade 11 boys explain:

“Like at this stage it’s not that we are bored of staying alone, it was pressure. You find that you are not dating and your friends are. Now when you all talk they talk about [relationships] and you wish that you could also be able to [join in].” “...when they tease a person who does not have a girlfriend they would normally say ‘so and so is weak!’ Then you get that pressure where you feel you have to go out there and find a girl to date.”

Mandisa (grade 11 girl) similarly said: *“sometimes it’s not like you love the person. It’s about you. You want to brag about your boyfriend to other people and compare...and tell them my boyfriend is better.”* As documented elsewhere (Selikow *et al.* 2009), having a boyfriend or girlfriend was socially desirable and socially rewarded.

Peers’ influence permeated most aspects of intimate relationships. Participants described their friends’ involvement in partner selection, facilitating relationship initiation and termination, and advising and supporting one another. Peer group evaluation held a lot of power and, as noted by a grade 11 boys’ group, *“you don’t want to disappoint them.”* Peers were the preferred source of information about

relationships and partners for almost all participants. Similar to other research findings (Selikow *et al.* 2009), Curtis (grade 11 boy) acknowledged that although peers may be equally inexperienced in relationship issues, adolescents turn to one another because they feel more comfortable discussing these issues amongst themselves:

“We will speak to our peers because we feel that it’s better. You can communicate with them more than what you communicate with your parents. We might not know a lot about relationships, but we teach each other about relationships because maybe the one has been in a relationship and now the other one also want to go in a relationship then that one can tell the next one about the relationship.”

Participants described choosing intimate partners primarily based on friends’ approval and a variety of desirable characteristics. Girls reported that a boy’s appearance or physical attractiveness including his clothing and his assumed wealth were important factors in partner desirability for casual relationships. Previous research has found similar attitudes (Harrison 2008; Harrison *et al.* 2001b; Jewkes and Morrell 2012). For more serious relationships, the girls maintained that “*personality*” and how the boy treats them – “*he must care for you*” – became more important. They described that “*if you in love,...the clothes and stuff won’t matter anymore*” (Grade 8 girls’ group). Boys noted the importance of physical attractiveness, particularly a girl’s figure. They also identified honesty and caring as important. Although there was some overlap in girls’ and boys’ concepts of caring in terms of emotional supportiveness exhibited in talking to one another (especially about family problems), they departed in other gendered interpretations. For example, girls associated caring with gift giving by boyfriends whereas boys associated caring with sexual behaviours and caretaking by girlfriends.

Peer pressure and status were not the only motivations identified by participants for engaging in relationships. Lina (grade 11 girl) said: “*I think it’s about experiencing, like, life. As you go through life you want to experience things so*

[intimate relationships] is one of them." This thought was expressed by many participants including a group of grade 8 boys: *"just experiencing life, just taking one step further... Trying, like, to interact with the different sex so that [we] can, like, know more and ...experience new feelings."* Older boys and girls described intimate relationships as fulfilling a need for love, support, and companionship.

"I think a relationship is like two people who find out more stuff about the person, get to learn the person more better. Her likes and dislikes, the stuff she would like to do, stuff she want to be in life one day." (grade 11 boys' group)

Some boys, both older and younger, discussed wanting girlfriends to provide guidance, particularly to discourage them from engaging in risk behaviours such as substance use, truancy, or neglecting school work. As discussed earlier, many of the girls' perceptions and the boys' reports suggested that sex motivated many boys to become involved in intimate relationships. Among the older girls, there were discussions about the purpose of intimate relationships as finding a *"soulmate," "Mr Right,"* or *"the one."* A few of the older girls stated that teenage girls got boyfriends *"for money."*

Although some participants discussed the desire for a supportive person as motivation for becoming involved in a relationship, more dominant were motivations related to peer pressure and peer status similar to findings among adolescents in other regions of South Africa (Harrison *et al.* 2001b; Jewkes and Morrell 2012; Selikow *et al.* 2009; Wood and Jewkes 2006) and internationally (Harper *et al.* 2004). Indeed, based on young people's uncertainty about how a relationship is built and inconsistent or limited contact with a partner, it seems that it may be more important to have a boyfriend or girlfriend to gain peer status than to engage in and build a relationship. The importance of status was also evidenced in participants' ideals around desirability of the partner's exhibited wealth. Young people in this study added that seeking life experience was an important driver to begin relationships. Participants' discussions of their ideas about and experiences with intimate relationships revealed contrasts between their knowledge, ideals, and behaviours suggesting that knowledge alone does not produce desired behaviours.

Discussion

Similar to previous work with South African teenagers (Harrison *et al.* 2001b), participants' enthusiasm to discuss intimate relationships together with the content of their reports indicated that these relationships are very important to them and a developmentally new area of exploration. This conclusion is perhaps unsurprising given the prevalence of young people's involvement in dating (Flisher *et al.* 2007). However, in contrast to survey findings of factors influencing South African young people's identity that reported boys found relationships more important than girls did, girls in this study seemed equally interested and at times more invested in intimate relationships in comparison to the boys (Alberts *et al.* 2003). There is congruency between the findings in this study and previous sexuality and violence research with adolescents in South Africa. What is unique about the findings in this study is the insight into the gendered and unstructured, fluid dating landscape of adolescents that is highly influenced by peer relations and how this context impacts on relationship and sex ideas and practices of the teenagers. It is important to consider what implications these findings may have on intervention and programme development to promote healthy relationships, prevent intimate partner violence, reduce sexual risk taking, and prevent HIV.

The adolescents' reports reveal highly gendered expectations, understandings, and practices within intimate relationships. Generally, boys seem to have more power in leadership-type roles than the girls who are ascribed more passive roles. This inequity is potentially highly problematic as girls have little agency or confidence in creating a relationship they want and are comfortable in, and they are often left feeling hurt or disillusioned by relationship experiences. At the extreme, girls are left vulnerable to abuse (Jewkes 2002). It is particularly worrying that young girls are experiencing and learning such inequities that may shape their later, adult relationships. Boys too have voiced their feelings of vulnerability to hurt and rejection and struggles with the gendered relationship scripts that hold them responsible for thinking of and initiating relationships and activities with girlfriends. Given this gender

inequity, it is important that interventions address gender issues and engage both boys and girls.

The descriptions of teen intimate relationships give us a sense that they are often nebulous and informal. This fluidity makes it difficult for adolescents to engage in proactive and deliberate collaborative decision-making within these relationships. Without a shared conception of how a relationship might grow and develop or a shared social script or schema for how it progresses, it is difficult to engage in future-oriented activities such as planning and considering consequences. In addition, the assumed active roles for boys and passive roles for girls within these relationships present another layer of complexity and vulnerability within decision-making. Furthermore, challenging these power dynamics within such an unstructured dating model may prove difficult. Programme developers cannot assume that there is a structure to South African young people's intimate relationships and dating practices. Interventions need to empower girls and boys to use health-promoting decision-making strategies that are workable within the fluidity of their relationships.

Although many young people explore intimate relationships and sex, their involvement is not uniform. These differences are crucial for intervention developers to consider such that the material and targeted skills are accessible to teens with varying experience with relationships or sex. Safe sex messaging is important, especially in the context of high HIV infection risk. However, a focus on sexual intercourse may not be accessible to young people who are not yet sexually active and it may unwittingly convey ideas about sexual intercourse as a norm and narrow the range of sexual practices to heterosexual intercourse. Others have similarly critiqued the focus on condom use in HIV prevention efforts adding that it is a simplified approach to a very complex, nuanced issue suggesting that the discussion on sexuality should be broadened (Harrison 2008; Harrison *et al.* 2001a; Pettifor *et al.* 2005). The stories of participants in this study suggest that prevention programmes should include attention to sexuality, especially sexual decision-making skills.

Given the influential role of peers in young people's intimate relationships, addressing peer relations and building skills to identify and deal with peer pressure in healthy and acceptable ways would be very useful. Indeed, the friendship context may be more accessible for young adolescents to initially access and engage with programme material – interpersonal skills could then be generalised to intimate relationships. Further, as suggested elsewhere (Selikow *et al.* 2009), it is important to help teens take a critical view of assumed group norms and values around dating, sex, violence, and gender and this critique may help to define and create healthier group norms. Participants in this and other studies (MacPhail and Campbell 2001) noted that they appreciated openly discussing intimate relationships, sex, and peer culture within a non-judgmental and non-punitive interaction because it gave them the opportunity to reflect on their beliefs, choices, and behaviour and they felt it would be useful for their peers to have a similar experience.

This study may not be representative of intimate relationships of all South African adolescents and the sample recruitment methods might have resulted in selection bias. Yet, this study provides a useful reference and in-depth insight into these relationships from the perspectives of urban youth. The gendered context of teenage intimate relationships as well as the varying levels and types of dating experiences within this study sample indicate that commonality of experience and understanding of these relationships cannot be assumed. The informal, fluid nature of these relationships adds to their complexity and suggests that a simplified model of South African young people's intimate relationships may not be fit with their lived experience.

The findings of this study have uncovered several future research questions. Future studies should consider exploring the developmental progression of adolescents' intimate relationships to better inform developmentally appropriate programming. Further exploration of decision-making and negotiation within these relationships and the interaction between individuals' pre-conceived ideas and

expectations about relationships and their ensuing relationship practices and experiences would also provide important understanding of this important domain of young people's lives. Such studies will hopefully contribute to building a framework to understand healthy or positive intimate or dating relationships among teenagers.

The insights into the micro-dynamics of these relationships from young people's perspectives were surprising and valuable in building a nuanced understanding of these relationships that is a crucial consideration during intervention development. Even evidence-based interventions need to be carefully adapted to particular groups, and their contexts, needs, and experiences. Incorporating the perspective of young people themselves is essential to appropriately and effectively engage teens and impact their dating behaviours (Noonan and Charles 2009). The challenge is to design a programme that engages younger adolescents and is relevant to their experiences of fluid, informal relationship practices. Such programmes should be accessible to young people with varying levels of experience with relationships and sex, and should allow adolescents to critically engage with their knowledge about relevant relationship issues and practice relationship building and negotiation skills that are practical within their complex relationship contexts. It is important that interventions balance promoting healthy relationships and challenging potential vulnerabilities or risks such as gender inequity and various types of intimate partner violence. Programming should try to consider multiple models of intimate relationships and a broader focus on interpersonal relationships instead of only dating relationships may be useful for universal-type interventions especially for younger adolescents. In order to help these young people to generalise relevant skills, explicit links and skills practice to illustrate common ground between friendships and intimate relationships may be useful. As study participants suggested, it is important to create a non-judgmental and non-punitive space that allows young people to actively engage with the topic and discuss how to integrate healthy relationship practices into their lives.

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CHAPTER 4

PREFACE

Citation:

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Conceptualisation:

The data for this paper were drawn from the dataset of a larger project: *Stepping Stones*. This project was a randomised control trial of a community-based intimate partner violence prevention for older adolescents. Prof. Jewkes was the principal investigator of this study. Under the supervision of Prof. Jewkes and Dr Mathews, I conceptualised and conducted the data analysis for this paper and wrote the full draft and all revisions of the paper. Both supervisors approved the final draft of the paper before it was submitted for publication (revisions currently under review at *Culture, Health, and Sexuality*).

Authors' contributions:

- A. Gevers – protocol development, data analysis, writing full draft and all revisions of the paper
- R. Jewkes – review of protocol, mentoring of data analysis, critical review of all drafts of paper
- C. Mathews – review of protocol, mentoring of data analysis, critical review of all drafts of paper

Additional motivation for inclusion:

This chapter addresses Objective 3 of the thesis and is presented in the format of a peer-reviewed journal article (the revisions recommended by peer reviewers have been submitted to the journal).

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CHAPTER 4

How intimate partner violence and sexual and reproductive health behaviour impact on older adolescents' relationship assessments and which relationship factors play a significant role in these assessments

Title of publication

What do young people think makes their relationships good? Factors associated with assessments of dating relationships in South Africa.

Authors:

Aník Gevers, Rachel Jewkes, and Cathy Mathews

Abstract

Little is known about the factors and outcomes associated with young people's subjective relationship assessments. Understanding what young people think makes their relationships 'good' or 'bad' would give us insight into what is important to them in their relationships as well as their decision-making and behaviour within them. Self-report data from 757 girls (mean age = 17.09 years) and 642 boys (mean age = 17.23 years) were analysed using logistic regression. Relationship primacy was significantly associated with positive relationships for girls and boys. Among girls, partner education and open communication about sexual and reproductive health were additionally related to relationship assessments. Among boys, very little quarrelling was the only additional factor associated with positive relationship assessment. Although relationship assessment was not associated with depression or problem drinking for either girls or boys, drug use was less likely among both girls and boys who reported having a positive relationship. Boys in positive relationships were also more likely to have used a condom the last time they had sex with their

main partner. Intervention programmes should equip teenagers with skills to develop and maintain positive relationships.

Keywords: young people, dating, relationship quality, relationship assessment, intervention development

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Introduction

Young people's intimate relationships are crucial for programmes and interventions to promote sexual and reproductive health, and prevent HIV and intimate partner violence (IPV). To improve relevance and acceptability, it is important that intervention developers have a nuanced understanding of teenagers' conceptualisations, constructions, and experiences of these relationships. One important aspect of young people's romantic relationship concepts is their ideas about what constitutes a 'good' relationship because it could provide insight into their motivations and choices to become involved in or stay in particular intimate relationships with particular partners. However, very little is known about what factors influence subjective assessments of what makes a relationship 'good' or 'bad'.

Perceptions of relationship quality and satisfaction are based on each partner's experience of a relationship and interpretation of interactions within it (Galliher *et al.* 2004). This assessment affects behaviour and emotional responses within the relationship (Galliher *et al.* 2004). Among adults, relationship satisfaction is linked with relationship functioning and the mental health and well-being of each member of a couple (Bradbury *et al.* 2000, Coleman 2011, Renshaw *et al.* 2011, Whitton and Kuryluk 2012). While there is an extensive literature of adult relationship satisfaction, less is known about factors and outcomes associated with young teenagers' relationship satisfaction, specifically those in low resource contexts.

Studies, primarily conducted in North America, on adolescent romantic relationship satisfaction and quality have discovered associations between these

assessments and teenagers' individual characteristics and family and peer relationships (Thomas and Daubman 2001, Haugen *et al.* 2008, Roisman *et al.* 2009, Galliher and Bentley 2010). Very few studies have investigated how or which relationship characteristics and relationship behaviours influence relationship satisfaction among teenagers. Engaging in out-of-school activities and communication has been positively associated with relationship satisfaction (Carlson and Rose 2012). Low-level sexual activity such as kissing was associated with greater relationship satisfaction whereas higher-level activity such as intercourse was negatively correlated with relationship quality for younger adolescents (Welsh *et al.* 2005). There was no significant association between intercourse and relationship satisfaction among the older adolescents (Welsh *et al.* 2005) suggesting a developmental change in concepts of good relationships. There is also evidence that these concepts may be different for boys and girls. Among girls, a positive association between relationship quality and lower conflict and higher harmony ratings of their boyfriends was found whereas among boys, better relationship quality was associated with ratings of their own supportive behaviour and their ability to consider their girlfriend's point of view during their interactions (Galliher *et al.* 2004).

We know very little about what factors young people take into account to assess their relationships and no published research to date has explored the influence of several relationship characteristics on young people's assessments of their dating relationships. Understanding the factors influencing teenagers' assessments will give us insight into what is important to them in their relationships and give clues to decisions and behaviours within them. All the published, peer-reviewed literature on this topic reports research conducted in the global North. It is

essential to build an understanding of young people's relationships in developing countries, such as South Africa, in order to inform public health initiatives to prevent IPV and HIV infection, and promote sexual and reproductive health and positive relationships. Therefore, the primary aim of this paper is to investigate what South African teenagers believe makes their relationships 'good' and a secondary aim is to explore whether this assessment has any impact on their health outcomes.

Method

Recruitment and data collection

This paper presents an analysis of the baseline data from participants in the Stepping Stones randomised control trial prior to their participation in the intervention; a detailed description of the study methodology and outcomes are available elsewhere (Jewkes *et al.* 2006b). Trial participants were recruited from 70 small, peri-urban towns or rural village sites near Mthatha in the Eastern Cape province of South Africa. Poor literacy levels and unemployment in this region are high; families rely on a combination of subsistence farming, informal trading, social grants or government pensions, and support from family members who are employed in other areas of the province or country. In general, participants in the trial were quite poor (Jewkes *et al.* 2006b). The trial condition was randomised at the level of town/village. Recruitment of 20 girls and 20 boys took place primarily at high schools at each study site. Trial participants were isiXhosa-speaking volunteers who were aware of the study content (i.e., sexual and reproductive health and intimate relationships) and they ranged in age from 15 to 26 years old; this method of recruitment resulted in a non-probability sample of study participants.

Structured questionnaires were administered in isiXhosa in individual, face-to-face sessions with trained, sex-matched interviewers; the measures relevant to this study are described in detail below. We present an analysis of data from 757 girls and 642 boys aged 15-18 years who had an intimate partner – a boyfriend or girlfriend – in the year before baseline interviews.

The ethics committees of the University of Pretoria and University of Witwatersrand granted approval for the trial. Participation was voluntary and informed consent was obtained from participants.

Measures

Background information

Information about participants' age, socioeconomic status (SES), and adverse childhood experiences were collected. Age in years was calculated using the date of birth provided by participants. SES was measured using several items including the ownership of a television and a car in the home, food availability in the home, and how easy it would be to access ZAR100 (approximately USD14) for a health emergency. A principal component factor analysis was run on these items to obtain a factor score. Higher scores indicate relatively higher SES within the study context described earlier. Cronbach's alpha was 0.56 for girls and 0.60 for boys.

Childhood trauma was included because these early experiences can play a role in individuals' later psychosocial functioning, including their intimate relationships (Banyard *et al.* 2001, Banyard and Cross 2008). Seventeen items, adapted from the Childhood Trauma Questionnaire (Bernstein *et al.* 1994), asked

participants whether they had experienced emotional or physical neglect, or emotional, physical, or sexual abuse before the age of 18 years. Participants responded to each item on a 4-point scale from Never to Very Often. A principal component factor analysis was run on these items to obtain a factor score. Higher scores indicate more childhood adversity. Cronbach's alpha was 0.75 for girls and 0.72 for boys.

Relationship information

Participants were asked about their current or most recent intimate relationship with a boyfriend or girlfriend. The measures included relationship assessment, age difference between partners, partner status as main or casual partner, relationship equity, communication, and relationship conflict and violence. These items were chosen for this study because they are typically addressed in intervention programmes aiming to prevent IPV and poor sexual and reproductive health (SRH) outcomes (Jewkes *et al.* 2006b, Jewkes *et al.* 2008, Jewkes 2010, Jewkes *et al.* 2011, Mathews *et al.* 2012).

The main outcome variable in the study was measure by a single item with four response categories asked participants how they would assess their current relationship with their main partner. Responses were dichotomised into positive assessments ('excellent' or 'good' ratings, coded as "1") and negative assessments ('ok' or 'not good' ratings, coded as "0"). The use of a single item measure allowed for a fully subjective interpretation by participants. This condition made possible a unique exploratory analysis to understand which relationship factors may have played a role in young people's assessments.

Age difference between partners was calculated using the main partner's age reported by the participant and the participant's age. A positive number indicates that the boyfriend was older and a negative number indicates that the girlfriend was older.

Participants provided information about the highest level of education obtained by their partner. For girls' partners, this variable was dichotomised into partners who had achieved matric (Grade 12, high school diploma) or further education and those who had not achieved this level. For boys' partners, this variable was dichotomised into partners who had achieved at least Grade 8 (first year of high school) or further and those who had not.

Participants were asked whether their current partner was their main partner and also whether they were that partner's main partner; these items were combined to identify mutual main partnership versus those that were not. This measure does not indicate monogamy; either partner may have had another, secondary or casual partner (Dunkle *et al.* 2004, Jewkes and Morrell 2010).

The Sexual Relationship Power Scale was adapted to assess relationship equity (Pulerwitz *et al.* 2000, Dunkle *et al.* 2004). Thirteen statement items each had four response options ranging from Strongly Agree to Strongly Disagree. For girls a typical item would read: "When [name of partner] and I disagree, he gets his way most of the time." For boys, the parallel item would read: "When [name of partner] and I disagree, I get my way most of the time." Higher scores indicated greater

equity or power-sharing in the relationship whereas lower scores indicated a more gender-conservative relationship in which boyfriends had more control. A principal component factor analysis was run on these items to obtain a factor score.

Cronbach's alpha was 0.73 for girls and 0.58 for boys.

Communication openness with partner was measured by six items with a four-point response option ranging from Strongly Agree to Strongly Disagree. Items ask about whether the participant talks with his or her partner about disagreements and how free the participant feels to discuss specific topics (e.g., hopes and fears, HIV, pregnancy). Lower scores indicate higher levels of communication openness between partners. Cronbach's alpha was 0.65 for girls and 0.59 for boys. Four items assessed the level of communication about SRH issues between the participant and her or his partner. Participants answered yes or no to each item including discussions about contraception, HIV prevention, sex, and having children together. Higher scores indicate more communication. A principal component factor analysis was run on both the openness and SRH-specific items to obtain a factor score.

Quarrelling with the partner was assessed with a single item asking how often the participant and his or her partner argue; the four response options ranged from Never to Often. Relationship conflict was measured by five items asking how often a participant and her or his partner argued about specific issues (e.g., money, fidelity, spending time together). A principal component factor analysis was run on these items to obtain a factor score. Cronbach's alpha was 0.74 for girls and 0.74 for boys. Emotional, physical, and sexual IPV measures were adapted from the World Health Organisation's instrument (World Health Organization 2000). Girls were asked about

victimisation by a male partner and boys were asked about perpetration against a female partner. Follow up questions after each section of emotional, physical, and sexual IPV were asked to ascertain whether the current partner was the perpetrator (for girls) or victim (for boys) of these behaviours. Three dichotomous items were created from these items to indicate victimisation (for girls) or perpetration (for boys) of each subtype of IPV.

Health outcomes

Health outcomes measures included safe sex practice, depression, and substance use. Participants were asked whether they had used a condom correctly the last time they had sex with their partner. This item was used as the safe sex practice health outcome measure.

The Centre for Epidemiological Studies on Depression Scale (CES-D) was used to assess depressive symptomology (Radloff 1977). This screening tool consists of 20 items about feelings and behaviours typical of depression with a four-point response scale ranging from Rarely or Never to Most or All of the Time. A score range from 0 to 60 was possible; participants who scored 16 and above were considered to have significant depressive symptomology and a dichotomous variable was created using this cut point. Cronbach's alpha was 0.92 for girls and 0.89 for boys.

Problem drinking was measured using the AUDIT screening instrument (Saunders *et al.* 1993). A score of 8 or higher was used to differentiate those who had a drinking problem and those who did not (in the past year). Cronbach's alpha

was 0.88 for girls and 0.71 for boys. Participants were asked whether they had ever used drugs including marijuana, benzene, methaqualone, injectable drugs, or any other drug; a dichotomous variable was created to differentiate participants who had ever used any drug from those who had never used any drug.

Data management and analyses

All statistical analyses were conducted in STATA 12. All procedures used in data analysis took into account the study design, viewing the baseline study as a stratified, two stage survey with participants clustered within towns/villages. Descriptive analyses were conducted stratified by participant sex and relationship quality assessment. Means were used for continuous variables and percentage and frequencies were used for categorical variables (e.g., how many participants had experienced IPV). Means were compared using T-tests and proportions using chi-square tests. In all analyses, estimates were carried out using standard methods for estimating standard errors from complex multistage sample surveys (Taylor linearization).

Logistic regression analyses were used to show the associations between relationship factors and relationship assessment (the outcome). All logistic regression models adjusted for age, SES, Childhood Trauma, and study site. Models were built separately for girls and for boys. In each case, models began with the inclusion of the control variables and all relationship measures. Systematic backward elimination of relationship variables was applied (if $p > 0.05$) to arrive at the most parsimonious model for girls' and for boys' relationship quality assessment.

Separate logistic regression analyses for girls and boys were built to investigate whether relationship quality assessment is an independent variable associated with health outcomes or behaviours: condom use at last sex with main partner, significant depressive symptoms, and substance use (problem drinking in the past year and ever drug use). These models included terms for age, SES, Childhood Trauma, and site.

Results

Participants

Participants were Black, isi-Xhosa speaking young people between the ages of 15 and 18 years (mean = 17.09 among girls, mean = 17.23 among boys). From the full baseline sample, 493 girls and 654 boys age 19 years and older were excluded. A further 159 girls and 38 boys were excluded because they did not have an intimate or dating relationship in the past year and another 6 girls and 33 boys were excluded because they did not provide a response for the relationship quality variable. These exclusions left 757 girls and 642 boys.

Descriptive data stratified by sex and relationship assessment are presented in Table 1 and summarised here. Most girls (n=749, 98.9%) were currently attending high school; 49.1% had completed grade 9 and 34.4% had completed grade 10. Similarly, most boys (n=635, 98.9%) were still in school; 47.2% indicated they had completed grade 9 and 25.4% grade 10. On average, girls and boys experienced some but not extreme levels of childhood adversity; most common were experiences of corporal punishment at home. Approximately one fifth of girls reported currently experiencing depression, but very few reported problem drinking or ever using drugs.

Among the boys, 13.7% were experiencing depression, almost one quarter met criteria for problem drinking, and over one third had ever used drugs.

On average, girls were dating boys who were approximately three years older than themselves and many boyfriends had not completed high school. Most girls reported that their relationship was mutually a main partnership with their boyfriend. Average relationship equity tended toward the lower, more controlling end of the scale. Girls' average communication scores suggested good communication skills and relatively open SRH communication. Although the majority of girls had sex with their partner, only 38.4% (n=291) used a condom the last time they had sex with their partner. Two thirds of the girls reported that they never or only rarely quarrelled with their partner and average relationship conflict indicated lower levels of conflict. A considerable proportion of girls (n=286, 39.78%) reported experiencing IPV within their relationship.

A large proportion of girls (n=575, 80.0%) reported a positive ("excellent" or "good") assessment of their current relationship. The positive assessment group differed significantly from the negative assessment group in that they had better communication skills, better educated partners, and more mutual main partnerships. Reports of relationship equity, relationship conflict, quarrelling, and all forms of IPV victimisation were similar in the positive and negative assessment groups. More girls in the negative assessment group reported problem drinking and drug use in comparison to the positive assessment group; whereas proportions of depressed girls were the same in both groups.

Overall, boys reported being approximately one year older than their girlfriends and most of these girlfriends had completed some high school grades. Most boys reported their relationship was a mutual main partnership and that they had sex with this partner, but less than a third reported using a condom the last time they had sex with this girlfriend. Quarrels were reportedly absent or rare in most boys' relationships and average relationship conflict tended toward the lower end of the range. Average relationship equity tended slightly toward the lower, more controlling end of the scale. Boys' average communication scores suggested that although they were fairly open in discussing SRH with their partners, they generally reported quite poor communication skills. In terms of IPV perpetration, overall 199 boys (31.4%) reported perpetrating some form of IPV against their current or recent partner.

Most boys (n=576, 89.7%) reported a positive assessment of their current relationship. In comparison to those negatively assessing their relationship, boys in the positive assessment group had better educated partners, more mutual main partnerships, quarrelled less with their partner, and more of these boys used a condom correctly the last time they had sex with their girlfriend. Boys in both positive and negative assessment groups reported similar levels of relationship equity, communication skills and openness, relationship conflict, IPV perpetration, and sex. Fewer boys in the positive assessment group reported ever using drugs in comparison to those in the negative assessment group; depression and problem drinking were similar in both groups.

Factors associated with relationship quality assessment

Table 2 presents the models of factors associated with relationship assessment for girls and boys. Among girls, better relationship quality was associated with having a more educated partner, communicating better about SRH matters with their partner, and being in a relationship where both partners are one another's main partner. Factors from girls' backgrounds also influenced relationship assessment. Specifically, girls from higher SES backgrounds and those exposed to more trauma in childhood were less likely to assess their relationship positively.

Among boys, only two relationship factors were associated with relationship quality assessment: quarrelling often with a partner decreased the likelihood of a positive relationship assessment, and a mutual main partnership increased the likelihood of a positive relationship assessment. In contrast to the girls, boys' background factors did not significantly influence their current relationship assessment. For both boys and girls, relationship equity, communication openness with partner, relationship conflict, intimate partner violence, having sex with partner, and age difference between partners were not associated with relationship quality assessment.

Health outcomes

Table 3 presents the adjusted odds ratios and confidence intervals for the association between girls' and boys' relationship assessment and various health outcomes. Among girls, relationship quality was not associated with correct condom use at last sex with the main partner, depressive symptomology, or problem drinking. A decreased likelihood of drug use was associated with girls' positive relationship

assessment. Among boys, positive relationship assessment was associated with correct condom use with the main partner and a decreased likelihood of drug use. There was no association with depressive symptomology or problem drinking.

Discussion

Although girls' and boys' concepts of good relationships shared one common value, relationship primacy, their models were different. For girls, a good relationship was one that was a mutual main partnership with an educated boyfriend in which there was good, open communication. For boys, a good relationship was one that was a mutual main partnership with very little quarrelling. Girls and boys who believed they were in good relationships were less likely than those in poor relationships to report ever using drugs and boys in these relationships were additionally more likely to report using a condom at last sex with their main partner.

The different models of relationship quality suggest that what girls' and boys' values in relationships differs. This difference is unsurprising given the gendered nature of young people's relationships (Harrison *et al.* 2001a, Harrison *et al.* 2001b, O'Sullivan 2005, Harrison 2008, Jewkes *et al.* 2010, Gevers *et al.* 2012). Qualitative research has found that young people ideally desire monogamy but, for a variety of reasons, often have multiple, hierarchical partnerships (Gevers *et al.* 2012, Jewkes and Morrell 2012). This study's findings suggest that teenagers value being the most important, or main, partner.

Among girls, having a more educated partner may indicate not just educational attainment, but also greater age and a greater likelihood of him earning

money. These factors increase his status; the girls themselves would gain peer status based on their partner's characteristics and these status rewards may influence how much girls like and value their relationships especially in a context where peers play a significant role (Gevers *et al.* 2012, Jewkes and Morrell 2012). The general preference for older partners among girls has been described in qualitative research and also found to intersect with other characteristics older teenage girls find desirable in a partner, namely sexual and romantic competence, money, maturity, and respectability despite the potential risks of these older partners also being controlling or violent (Jewkes and Morrell 2012). However, this pattern is not a reference to the 'sugar daddy' phenomenon discussed in other research with young women (Silberschmidt and Rasch 2001, Jewkes and Abrahams 2002, Kaufman and Stavrou 2004, Luke 2005) because boyfriends were, on average, approximately three years older than the girls in this study. Of concern is previous research that found that having a partner three or more years older and having an educated partner are significant risks for HIV among these young women perhaps because these men can use their higher status and increased mobility to get more partners and thus have larger sexual networks (Jewkes *et al.* 2006a). Although education may also improve skills and knowledge that improve relationships, it is concerning that a feature that adolescent girls value in a partner may also be a significant risk factor to their health and well-being; therefore, interrogating relationship quality concepts in interventions is recommended.

Open sexual communication has been associated with overall relationship satisfaction among young adults in the USA (Montesi *et al.* 2011) and was similarly found to be associated with positive relationships among girls in this study. Personal

characteristics such as confidence and good SRH knowledge may influence girls' abilities and likelihood to discuss SRH matters with partners and the ability to discuss and negotiate SRH matters may signify a more supportive and open partner and result in safer sex practices.

Boys seem particularly averse to quarrelling with their partners. Patriarchal norms may explain this association; that is, men may expect to be unchallenged leaders in their relationships with women and they may interpret quarrelling as a challenge to their authority (Jewkes and Morrell 2012). Indeed, boys in this study reported relatively low levels of gender equity in their relationships. Further, other research with this population has noted that most boys had conservative gender attitudes (Shai *et al.* 2012). Given the link between gender inequity and IPV and sexual risk behaviour (Jewkes 2002, Jewkes *et al.* 2010, Shai *et al.* 2012), gender transformative interventions to improve boys' attitudes and perceptions of gender relations and building their conflict resolution skills are needed.

It is notable that IPV did not play a significant role in girls' or boys' relationship assessment. This trend may be owing to violence being fairly common and suggests social acceptance of such violence (Jewkes and Morrell 2012). This finding does not suggest that teens like or want such violence, but perhaps they are unable to challenge widely accepted IPV nor the patriarchal norms supporting it and they have little access to recourse. The social importance and value of dating relationships among teenagers may also contribute to acceptance of IPV.

Open, assertive communication skills and relationship equity are often promoted in intervention programmes (e.g., Foshee *et al.* 1998, Jewkes *et al.* 2006b, Jewkes *et al.* 2011) especially in efforts to prevent IPV. Yet, there was no significant association between these factors and positive relationship quality assessment. Nevertheless, the role of these skills and attitudes in IPV prevention are important.

Having sex with a partner was not a significant factor in both girls' and boys' models of relationship quality, similar to the finding in the USA (Welsh *et al.* 2005). Yet, studies have described the importance of sex in adolescent intimate relationships (Harrison 2008, Selikow *et al.* 2009, Gevers *et al.* 2012). Qualitative research findings have discussed the desire, among young women, for good sex (Jewkes and Morrell 2012) so it is possible that although sex itself does not influence relationship assessments, sexual pleasure may play a role. A majority of participants in this sample were having sex with their partners so the lack in variance may have influenced this finding.

The analysis of associations between relationship assessment and health outcomes is limited by the inability to establish the direction of the association. That is, poor mental health and risk behaviour may lead to poorer relationships or a poor relationship may lead to or exacerbate mental health problems and risk behaviour. Drug use among young people in this community is particularly uncommon for girls and socially disapproved for boys, so drug-using teens may be marginalised and vulnerable in many ways that may impact on their intimate relationships.

Positive relationship assessment was associated with condom use at last sex among the boys. Consistent condom use within this study group was found to be rare and condom use patterns were associated with patterns in young men's gender attitudes, IPV perpetration, sexual risk-taking, and SES (Shai *et al.* 2012). Of concern, inconsistent condom users, compared to consistent and never users, had a high-risk profile in terms of IPV perpetration and risky sexual behaviour (Shai *et al.* 2012). It is likely that consistent users were more likely to report condom use at last sex in this study; therefore, these boys are likely more equitable and less violent and this demeanour may impact positively on their relationships. This finding further suggests that boys can be happy with their relationship and use condoms which contrasts with qualitative research findings that suggests condoms are often perceived as decreasing the love and trust between partners (Gevers *et al.* 2012, Shai *et al.* 2012). It is also possible that boys in positive relationships have better social and relationship skills including safer SRH practices. Interventions should challenge ideas about condoms restricting relationship quality; indeed, condom use may indicate valuing sexual health in the relationship, which may contribute to a more positive relationship.

There are several limitations to this study. The data are cross-sectional and thus we cannot make conclusions on causality or investigate changes in relationship assessment. It is possible that some of the associations between relationship characteristics or behaviour and relationship assessment are bi-directional. For example, young people who have better social and relationship skills are likely to engage in more open, less quarrelsome relationship behaviours which contribute to a positive relationship and the assessment itself may motivate adolescents to

engage in continuous health-promoting behaviours. Poor relationships may contribute to depression and substance use, but people with depression or substance use problems may also have cognitive biases and skill deficits that contribute to a negative relationship.

Another limitation is the homogenous study sample (black, isiXhosa-speaking South Africans) and so generalisability to the broader population may be limited. In addition, the study relied on a non-probability sample of volunteers who knew the intervention content and which intervention arm their cluster was assigned to and some girls were prevented from participating by their strict parents (Jewkes *et al.* 2008). Personal characteristics (e.g., extroversion, social anxiety) and relationship characteristics (e.g., a partner who disapproved of participation or a relationship that was being conducted in secret) may also have influenced participation. Very conservative communities, and some conservative families within amenable study communities, declined participation in the study suggesting that the sample may be under representative of people with very conservative attitudes to gender and adolescent relationships. The developmental differences between 15/16 year olds and 17/18 year olds may impact on their relationship conceptualisations and constructions; however, an age stratified analysis was not possible. The large majority of the sample were 17/18 year olds and therefore the findings presented here are likely more reflective of older adolescents. This study included both peri-urban and rural, male and female young people in the large sample and similarities between qualitative reports from this study area and other studies (Gevers *et al.* 2012) suggests that there may be several similarities in young people's ideas about intimate relationships in different areas of the country.

Self-report measures in any study run the risk of biased or inaccurate reporting and this risk may increase when measuring SRH and IPV behaviour. Participants' anonymity and confidentiality were assured in this study to allay anxieties. The extent of violent and other risk behaviour reported in this sample suggest that participants were generally comfortable enough to report these behaviours and, therefore, inaccuracies in the data are more likely to reflect an underestimation. The exploratory analyses were limited by the variables available in the Stepping Stones study dataset and there may be other factors that influence adolescents' assessments of their relationship quality. Further, there may be nuances in the relationship factor variables that are not captured by the measurement tools used in this study. In particular, the relationship quality assessment relied on a response to one, face-valid item. Nevertheless, as noted earlier, this measurement approach allowed for a unique analysis of factors that influence teenagers' relationship assessments.

Conclusions

These results have given insight into factors important to young people themselves in their dating relationships. Some of the factors influencing young people's relationship assessments may pose some risk (e.g., having educated partners or avoiding discussions for fear of beginning to quarrel) and the lack of influence of important issues (e.g., IPV) suggest that interventions should encourage teens to critically evaluate their personal and group concepts of good and poor relationships. For example, challenging norms and attitudes accepting of IPV and

promoting gender equitable attitudes and relationships may impact on adolescents' relationship expectations and subsequent assessments. In addition to promoting healthier, pro-social attitudes and norms, interventions should equip young people with skills to develop and maintain good, healthy relationships and how to deal with unsatisfactory or poor relationships. These skills will help young people to use their dynamic relationship assessments to guide their behaviour and choices within their relationships.

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Table 1. Descriptive data for sociodemographic and relationship descriptor variables, depression, and substance use stratified by relationship assessment

	Girls (N=757)				Boys (N=642)			
	Total (n=757)	Positive Assessment (n=575)	Negative Assessment (n=182)		Total (n=642)	Positive Assessment (n=576)	Negative Assessment (n=66)	
	Mean (SE)	Mean (SE)	Mean (SE)	p	Mean (SE)	Mean (SE)	Mean (SE)	p
Age (years)	17.09 (0.04)	17.12 (0.04)	17.02 (0.06)	0.260	17.23 (0.03)	17.26 (0.04)	17.18 (0.11)	0.439
SES	-0.02 (0.07)	-0.06 (0.08)	0.09 (0.11)	0.289	0.09 (0.09)	0.13 (0.09)	-0.07 (0.20)	0.209
Childhood Trauma	0.02 (0.05)	-0.02 (0.05)	0.13 (0.08)	0.071	-0.04 (0.04)	-0.06 (0.06)	0.001 (0.10)	0.633
Age difference between partners (years)	3.18 (0.10)	3.27 (0.10)	2.92 (0.17)	0.058	1.10 (0.05)	1.11 (0.06)	1.08 (0.17)	0.865
Relationship Equity	0.04 (0.05)	0.10 (0.06)	0.13 (0.08)	0.192	0.11 (0.05)	0.09 (0.06)	0.30 (0.17)	0.114
Communication Openness with Partner	-0.03 (0.05)	-0.07 (0.05)	0.11 (0.07)	0.017	0.11 (0.05)	0.08 (0.06)	0.35 (0.19)	0.079
Communication about Sexual and Reproductive Health	0.04 (0.04)	0.09 (0.04)	-0.12 (0.07)	0.003	-0.19 (0.47)	-0.14 (0.05)	-0.43 (0.15)	0.069
Relationship Conflict	0.002 (0.07)	-0.02 (0.08)	0.06 (0.15)	0.660	0.007 (0.04)	-0.03 (0.05)	0.30 (0.18)	0.059
	% (n)	% (n)	% (n)	p	% (n)	% (n)	% (n)	p
Partner Education ^a	30.5% (233)	33.7% (194)	21.4% (39)	0.002	69.9% (449)	71.4% (411)	57.6% (38)	0.036
Mutual main partnership	82.2% (627)	88.0% (506)	66.5% (121)	0.000	86.0% (552)	89.8% (517)	53.0% (35)	0.000
Quarrelling with partner								

	Never	19.8% (150)	19.5% (112)	20.9% (38)		29.9% (192)	30.7% (177)	22.7% (15)	
	Rarely	46.9% (355)	45.9% (264)	50.0% (91)	0.125	45.8% (294)	46.9% (270)	36.4% (24)	0.000
	Sometimes	27.1% (205)	29.0% (167)	20.9% (38)		17.9% (115)	17.4% (100)	22.7% (15)	
	Often	6.2% (47)	5.6% (32)	8.2% (15)		6.4% (41)	5.0% (29)	18.2% (12)	
Emotional IPV		26.2% (190)	25.6% (140)	28.9% (50)	0.429	21.6% (137)	20.9% (119)	28.6% (18)	0.125
Physical IPV		26.4% (197)	27.6% (156)	22.9% (40)	0.232	17.9% (113)	17.1% (97)	25.4% (16)	0.087
Sexual IPV		10.2% (75)	9.1% (51)	13.9% (24)	0.082	4.0% (25)	4.1% (23)	3.2% (2)	0.746
Had sex with main partner		96.3% (725)	96.3% (550)	96.2% (175)	0.902	83.5% (533)	84.5% (484)	75.4% (49)	0.114
Correct condom use at last sex with main partner		38.4% (291)	39.1% (225)	36.3% (66)	0.404	29.3% (180)	30.9% (171)	14.8% (9)	0.010
Depression (significant symptomology)		20.5% (155)	20.2% (116)	21.4% (39)	0.687	13.7% (88)	13.4% (77)	16.7% (11)	0.470
Problem drinking		4.6% (35)	3.7% (21)	7.7% (14)	0.019	24.5% (157)	24.7% (142)	22.7% (15)	0.731
Drug use		6.1% (46)	4.9% (28)	9.9% (18)	0.007	38.2% (245)	36.8% (212)	50.0% (33)	0.041

^aRefers to girls' partners who have at least completed high school or boys' partners who have at least a primary level schooling

Table 2. Factors associated with positive relationship assessment among girls and boys

	Girls			Boys		
	OR	95% CI	p	OR	95% CI	p
Age (years)	1.145	0.926-1.414	0.237	1.172	0.909-1.464	0.383
SES	0.846	0.710-0.995	0.018	1.116	0.935-1.357	0.320
Childhood Trauma	0.842	0.710-0.990	0.055	1.071	0.777-1.367	0.671
Communication about Sexual and Reproductive Health	1.245	1.067-1.420	0.018			
Mutual main partnership	3.670	2.488-5.633	0.000	6.986	3.993-12.065	0.000
Quarrelling with partner						
	Never			Reference group		
				0.991	0.472-1.884	0.981
	Rarely					
				0.629	0.264-1.524	0.273
	Sometimes					
				0.276	0.099-0.653	0.009
	Often					
Partner Education	2.069	1.380-3.142	0.001			

Table 3. AORs of Positive relationship assessment associations with other health outcomes

OUTCOMES	Girls			Boys		
	OR	95% CI	p	OR	95% CI	p
Correct condom use at last sex with main partner (vs. incorrect or no use)	1.169	0.857-1.613	0.400	2.492	1.216-5.291	0.015
Depression (vs. no depression)	0.934	0.651-1.415	0.752	0.764	0.372-1.501	0.464
Problem drinking (vs. no problem drinking)	0.583	0.241-1.111	0.164	1.061	0.555-2.045	0.845
Drug use (vs. no drug use)	0.521	0.280-0.881	0.053	0.518	0.338-0.991	0.020

CHAPTER 5

PREFACE

Citation:

Gevers, A., Mathews, C., Cupp, P., Russell, M., & Jewkes, R. (submitted) Illegal yet developmentally normative: A descriptive analysis of young, urban adolescents' dating and sexual behaviour in Cape Town, South Africa. Current status: This paper was submitted to *BMC International Health and Human Rights* and accepted for peer review in November 2012. In December 2012, the editors asked for revisions to be made to the manuscript based on peer review responses. These revisions have been made and returned to the journal for consideration in December 2012. The revised article is presented below for Chapter Five.

Conceptualisation:

The data for this paper were drawn from the dataset of a larger project: *Respect 4 U*. This project aimed to develop a school-based intimate partner violence prevention and healthy relationships promotion curriculum for Grade 8 learners and included a pilot evaluation phase. My role on this project was primarily to develop intervention materials and additionally to assist in the overall implementation of the project including research and training activities. Under the supervision of Dr Mathews and Prof. Jewkes, I conceptualised and conducted the data analysis for this paper and wrote the full draft and all revisions. In addition, later revisions were reviewed by co-investigators on the *Respect 4 U* project Dr Pam Cupp and Dr Marcia Russell; therefore, these collaborators also appear as co-authors on this paper. All co-authors approved the final draft that was submitted for publication (revisions currently under review at *BMC International Health and Human Rights*).

Authors' contributions:

A. Gevers – protocol development, data collection (with assistance from *Respect 4 U* project staff), data analysis, writing full draft and all revisions of the paper
 C. Mathews – review of protocol, mentoring of data analysis, critical review of all drafts of paper
 P. Cupp – review of drafts of paper
 M. Russell – review of drafts of paper
 R. Jewkes – review of protocol, mentoring of data analysis, critical review of all drafts of paper

Additional motivation for inclusion:

This chapter addresses Objective 4 of the thesis and is presented in the format of a peer-reviewed journal article (the revisions recommended by peer reviewers have been submitted to the journal).

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CHAPTER 5

Young adolescents' sexual behaviour in the context of dating relationships

Title of publication:

Illegal yet developmentally normative:
A descriptive analysis of young, urban adolescents' dating and sexual
behaviour in Cape Town, South Africa

Authors:

Aník Gevers, Cathy Mathews, Pam Cupp, Marcia Russell,
and Rachel Jewkes

Abstract

Background:

In South Africa, it is illegal for adolescents under age 16 years to engage in any sexual behaviour whether kissing, petting, or penetrative sex, regardless of consent. This cross-sectional study investigated the extent to which young adolescents engage in various sexual behaviours and the associations between dating status and sexual behaviours.

Method:

Grade 8 adolescents (N=474, ages 12-15 years, mean = 14.14 years) recruited from Cape Town area schools completed surveys providing information about their sociodemographic backgrounds, dating experience, sexual behaviour, and substance use.

Results:

Lower hierarchy sexual behaviours, such as kissing (71.4% of girls; 88.4% of boys), were more common than oral (3.9% of girls; 13.8% of boys), vaginal (9.3% of girls; 30.0% of boys), or anal (1.4% of girls; 10.5% of boys) sex. Currently dating girls and boys were more likely to engage in all sexual behaviours and several risk behaviours in comparison to their currently non-dating counterparts. High-risk behaviours included penetrative sex (21.1% of dating vs 4.5% of non-dating girls; 49.4% of dating vs 20.2% of non-dating boys), sex with co-occurring substance use (22.2% of dating vs 0 non-dating girls; 32.1% of dating vs 40% of non-dating boys), and high

levels of no contraceptive use (26.1% of sexually experienced girls; 44.4% of sexually experienced boys). Among girls, there were significant associations between ever having penetrative sex and SES (OR=2.592, $p=0.017$) and never dating (OR=0.330, $p=0.016$). Among boys, there were significant associations between ever having penetrative sex and never dating (OR=0.162, $p=0.008$). Although the currently dating group of young adolescents appear to be a precocious group in terms of risk behaviour relative to the currently non-dating group, teenagers in both groups had experience in the full range of sexual behaviours.

Conclusions:

Many young adolescents are engaging in a variety of sexual behaviours. Of particular concern are those engaging in risky sexual behaviour. These findings indicate that adolescents need to be prepared for sexual negotiation and decision-making from an early age through comprehensive and accessible education and health services; sections of current legislation may be a barrier to adopting such policies and practices.

Keywords: adolescent, sexual behaviour, courtship, South Africa, health policy, health legislation

Background

During adolescence, youth usually begin to explore their sexuality (Johnson 1999, Flisher, Reddy et al. 2003, Hartell 2005, Auslander, Rosenthal et al. 2006, Zimmer-Gembeck and Helfand 2008). Yet, in South Africa any sexual behaviour including kissing, petting, and penetrative intercourse between young adolescents (under 16 years of age), regardless of consent, is illegal (the Criminal Law [Sexual Offences and Related Matters] Amendment Act No. 32 of 2007; (Republic of South Africa 2007)). In the case of similar age adolescents, both partners are prosecutable under this law whereas in an age discordant couple, where one partner is two or more years older than the other, a statutory offense applies only charging the older partner with a crime. Such laws are incongruent with common sexual practice among South African adolescents (Flisher, Reddy et al. 2003, Hartell 2005). This law may negatively impact healthcare and education services for young adolescents by forcing a mandatory reporting and abstinence-only approach. Such an approach is not only in contravention of provisions in other South African legislation (McQuoid-Mason 2011), but it may compromise comprehensive education and reproductive health services that promote and support a spectrum of healthy sexual decision-making.

Given the rapid and significant developmental changes during this period it is important to understand patterns of behaviour at different stages of adolescence. Young adolescents' sexual behaviour is of particular concern given the myriad adverse correlates associated with early sexual debut, including having unprotected sex, having multiple sexual partners, STI and HIV infection (Pettifor, van der Straten et al. 2004, Harrison, Cleland et al. 2005, Department of Health 2006, Mathews, Aaro et al. 2009, Christofides 2012, Wand and Ramjee 2012), early pregnancy (Jewkes, Vundule et al. 2001), and a host of risk behaviours and social and emotional difficulties (Collins 2003) including alcohol use, delinquency, school problems, and (among girls) depressive symptoms (Ciairano, Bonino et al. 2006, Zimmer-Gembeck and Helfand 2008, Shulman, Walsh et al. 2009). In sub Saharan Africa, young adolescent girls have higher rates of HIV prevalence than adolescent boys (Pettifor, Rees et al. 2005, Abdool Karim, Sibeko et al. 2010, Kharsany, Mlotshwa et al. 2012). A national household survey found that among youth between

the ages of 15 and 24 years, 15.5% of young women and 4.8% of young men were HIV positive (Pettifor, Rees et al. 2005). In a recent school-based survey in KwaZulu Natal, South Africa, HIV prevalence among girls was 12.7% at School A and 7.0% at School B whereas for boys it was 1.4% at School A and 2.5% at School B (Kharsany, Mlotshwa et al. 2012). The sex differences in HIV prevalence and our understanding of adolescent sexuality and the influence of gender norms indicate that it is important to develop nuanced understandings of girls' and boys' behavioural patterns because this information must inform prevention interventions (Rotheram-Borus, Swendeman et al. 2009).

Much of the adolescent sexual behaviour data focuses on sexual intercourse, yet adolescent sexual exploration and expression may span a variety of behaviours such as hand holding, hugging, kissing, petting or masturbation, oral sex, vaginal sex, and anal sex (Auslander, Rosenthal et al. 2006, Waylen, Ness et al. 2010). Studies in the US and the UK with young adolescents found that lower hierarchy sexual behaviours such as hand holding, hugging, and kissing were more prevalent (25-50% of the samples) than higher level behaviours such as intercourse (between 5% and 20% of the samples) (Sneed, Strachman et al. 2009, Waylen, Ness et al. 2010).

Previous study results indicate that a significant proportion of South African youth experience sexual debut between the ages of 14 and 17 years (Flisher, Reddy et al. 2003, Pettifor, Rees et al. 2004, Simbayi, Chauveau et al. 2004, Pettifor, Rees et al. 2005, Jaspan, Berwick et al. 2006). A Cape Town school-based study reported that 11.9% of 12-year old boys and 0.9% of 12-year old girls had experienced sexual intercourse with the proportions increasing to 45.9% of boys and 24.5% of girls by age 16 years (Flisher, Reddy et al. 2003). A school-based study with young teenagers (age 13 years) in South Africa and Tanzania who had not yet had sexual intercourse found that approximately one in five teens experienced sexual debut during the 15 months of the study (Mathews, Aaro et al. 2009). These studies indicate that a significant proportion of South African youth are sexually active before the legal age of consent.

Sexuality is expressed and experienced in various ways in different relationship contexts (Auslander, Rosenthal et al. 2006, Ciairano, Bonino et al. 2006, Bay-Cheng, Robinson et al. 2009). Although it is assumed that dating relationships are the primary venue for sexual exploration (Furman 2002, Collins, Welsh et al. 2009), it should be noted that sexual exploration may also occur individually (e.g., masturbation), within non-dating relationships, or as casual encounters. Interviews with Grade 8 and 11 adolescents in Cape Town found that dating and sex are not entirely co-occurring (Gevers, Jewkes et al. 2012).

All sexual activity between young teenagers is illegal and in some controversial cases teenagers have been charged within the terms of this legislation. Little is known about the prevalence of non-intercourse sexual behaviours among young South African adolescents nor the circumstances in which these teenagers experience sex such as the relationship with the sex partner, contraceptive use, consent, co-occurring substance use, and the frequency of sex which would provide insight into the levels of risky sexual contact. The aims of this paper are to describe (a) the kinds of sexual activity young (under age 16), urban South African adolescents are engaging in, including risky sexual behaviours; and (b) the connections between dating and sexual activity in this age group (c) the factors associated with early penetrative sex. The implications of these data for risk prevention, especially in light of legal concerns, will be discussed.

Method

Recruitment and data collection

The results reported in this paper are a secondary analysis of baseline data collected for the pilot evaluation of a school-based intimate violence prevention intervention. Specifically, this analysis is based on 474 (out of 549) cases of students under the age of 16 years. The recruitment and data collection method for the pilot study are briefly described. Research participants were recruited from two randomly selected Grade 8 classes in each of nine public schools in the Cape Town area. Schools were purposively selected for the pilot study to be demographically representative of the population in Cape Town, and included schools from middle

class, lower income predominantly Coloured and lower income predominantly Black African areas.

Participants completed surveys individually in classroom settings in 2009-2010. Six classes from three schools completed the survey using paper and pencil with a fieldworker reading the questions and answer options to participants during the first phase of the pilot study. The remaining twelve classes (from six schools) used audio-enhanced personal digital assistants (A-PDAs) during the second phase of the pilot study. Participants could choose to complete the survey in Afrikaans, English or Xhosa and those who used A-PDAs were able to switch languages throughout the survey.

Permission to conduct the study was granted by the University of Cape Town Health Sciences Faculty Human Subjects Ethics Committee, the Pacific Institute for Research Institutional Review Board, the Western Cape Education Department, and the principals of each school. Informational material and consent forms were sent to parents via their eligible Grade 8 student; school staff facilitated this process as part of their routine communications with students and parents. Informed consent was obtained from eligible learners' guardians; and informed assent was obtained from participants. Participation was voluntary and anonymity was guaranteed. Twelve students declined to participate; to minimize the possibility of coercion, students were not required to provide a reason for this choice. All participants were given a leaflet of mental health and intimate partner violence (IPV) related help resources; researchers were available to talk to participants distressed by the survey or wanting to seek help for IPV. Participants received ZAR20 (approximately USD2.67) and a small snack after the survey as a token of appreciation.

Measures

Measures included in this survey were chosen from surveys previously used with South African adolescents in earlier studies (Jewkes, Nduna et al. 2006, Cupp, Zimmerman et al. 2008, Mathews, Aaro et al. 2012). Socio-demographic information previously found to be related to sexual behaviour among adolescents included age (computed from the month and year of birth reported by participants), race, sex, and

socioeconomic status (Mathews, Aaro et al. 2009, Reddy, James et al. 2010). The latter item was quantified using a dichotomous proxy variable – living in a brick house (versus shack, hut, backyard dwelling, “wendy house” [simple wooden one-room structure], or apartment) – because it stratifies relative higher income (who could afford to rent or own a brick house) and lower income families within the population surveyed in this study. Other risk behaviours assessed included absenteeism, school failure, problem drinking in the past three months (assessed using the 3-item AUDIT-C scale yielding a 0-12 summed score; boys scoring 4 and higher and girls scoring 3 and higher indicated problem drinking (alpha = 0.748) (Bush, Kivlahan et al. 1998), and drug use in the past three months (two items asking about marijuana (“dagga”) or methamphetamine (“tik”) use with 5 response options ranging from “never” to “daily or almost daily”; recoded to a dichotomous item distinguishing never users and ever users).

Dating history was assessed by two items asking about the number of current and lifetime dating partners. Number of sexual partners (vaginal or anal penetrative sex) in the past three months was similarly assessed.

Sexual behaviour was measured by a series of dichotomous items asking whether or not the participant had engaged in the behaviour in the past three months and whether they had ever engaged in the behaviour. Sexual behaviours were defined for learners and included kissing, light petting (“touching each other’s upper body, under clothes or with no clothes”), heavy petting (“touching each other’s private parts, under clothes or with no clothes”), oral sex (“contact between the mouth and the penis, vagina, or anus), vaginal sex (“contact with someone during which the penis enters the vagina”), and anal sex (“contact with someone during which the penis enters the anus or back passage”). Dichotomous items for penetrative sex (in the past three months and ever) were calculated using the oral, vaginal, and anal sex items. For descriptions of substance use during sex and the last sexual encounter, only data from sexually active participants (defined as those who had experienced penetrative sex ever) were considered valid and thus extracted and analysed. Participants were asked a series of questions about how often, in the past three months, they or their sex partner had used alcohol, marijuana, or

methamphetamine when they had sex. Answers from the 4-point scale were dichotomised to distinguish the “never” and “ever” (in the past three months) users. Descriptive items for the last sexual encounter (any one or combination of penetrative sexual acts depending on the most recent experience of the participant) included the relationship with the sex partner (e.g., a boyfriend/girlfriend, friend, family, etc.), the consensual nature of the encounter (e.g., forced or raped, persuaded or tricked, or willing), the last time they had sex (categorical ranges from less than 4 weeks ago to more than 6 months ago), and contraceptive methods used (e.g., none, condoms, hormonal, etc.). Sex partner information for each type of sexual behaviour was not collected; instead sex partner here would include someone with whom the participant has had some form of penetrative sex.

Data management and analysis

The data from the paper-pencil surveys ($n=130$) were manually entered into SPSS. The data from the A-PDAs ($n=344$) were electronically extracted and converted into an SPSS file. There were no significant differences in levels of reporting on dating, sexual behaviour, or substance use between these two methods of data collection.

Analyses comparing currently dating to currently non-dating girls, and currently dating to currently non-dating boys were performed. Statistical tests were adjusted for the clustered (by school) sampling strategy using the complex samples function in SPSS; clusters were equally weighted because the sample is representative of public schools in Cape Town. General linear model tests were used to compare means of continuous variables; chi-square tests were used to compare categorical variables where there were at least 5 observations in each cross-tabulation cell; and Fisher's Exact Test was used for comparisons of categorical variables with small ($n<5$) expected observations. Logistic regression models were used to predict lifetime experience of any penetrative sex.

Results

Participants

The sample includes 282 (59.49%) girls and 190 (40.08%) boys. Most (74.8% and 85.9% respectively) reported that the survey was easy or very easy to understand and that they were very honest or completely honest in answering the questions. Participants ranged in age from 12 to 15 years old. Among the girls, 124 (44.1%) were currently dating and 156 (55.5%) were currently not dating. Among the boys, 90 (47.4%) were currently dating and 100 (52.6%) were currently not dating. The sociodemographic characteristics and risk behaviour of the sample are presented in Table 1 stratified by sex and dating status.

Dating partners

The number of dating and sex partners of participants are shown in Table 2. Over half (55.1%) of the non-dating girls had dated before; 69 girls (24.5% of all girls) had never dated. Dating girls reported a significantly higher number of lifetime dating partners with most (77.8% of dating girls) reporting two or more dating relationships in their lifetime. Almost one quarter of dating girls (24.2%) reported having two or more current dating partners, but none reported having more than one sex partner in the past three months.

Among boys, 12.1% reported that they had never been involved in a dating relationship. Dating boys reported significantly more lifetime dating partners, the majority (78.9% of dating boys) reported more than two by the time of the survey. Almost one third of the currently dating group (31.1%) reported being currently involved in multiple concurrent dating partnerships. Dating boys reported having had significantly more sex partners in the past three months than boys who had ever had sex but were not currently dating.

Sexual behaviour

Comparisons between dating and non-dating groups of sexual behaviours and overall descriptive data of sexual behaviour stratified by sex are presented in Table 3. Kissing is a common experience among the young adolescent girls in this sample. Further, several of these girls have engaged in some or all of the range of

sexual behaviours with more girls experienced in light and heavy petting than penetrative, primarily vaginal, sex. Overall, 6.4% of girls have had penetrative sex (oral, vaginal, and/or anal sex) in the past three months and 11.8% have had penetrative sex in their lifetime. A greater proportion of dating girls in comparison to non-dating girls reported engaging in all sexual behaviours recently and in their lifetime with the exception of heavy petting and anal sex in the past three months for which there were no statistically significant differences. Of those who had sex in the past three months, four (22.2%) dating girls reported that either they or their sex partner used alcohol and/or drugs when having sex.

Overall among boys, kissing was relatively common. Slightly more boys reported having sex than engaging in heavy petting. More than one third (34%) of boys have had penetrative sex ever in their life and 16.9% had done so in the past three months. More dating boys had engaged in all sexual behaviours during the past 3 months and ever in their lifetime in comparison to non-dating boys with the exception of oral sex in the past three months for which there was no statistically significant difference. Almost one half (49.4%) of dating boys and one fifth (20.2%) of non-dating boys have had penetrative sex. In contrast to these differences, there was no significant difference between dating and non-dating boys on co-occurring substance use and sex except that more dating than non-dating boys reported their partners' co-occurring drinking and sex.

Descriptive information about the last sex encounter is presented in Table 4 stratified by sex; only participants who had ever had penetrative sex were included in this analysis. Girls largely reported that their last sex partner was a boyfriend or another partner (79.2%). On the other hand, boys' reported last sex partner varied more; primarily they described this partner as a girlfriend or another partner (46.3%), a friend (24.1%), or person from the area (22.3%). Two boys reported that their last sex partner was a family member. Although the majority of girls (70.8%) and boys (82%) reported that their last sex was consensual, several girls (29.1%) and boys (18%) said that they were persuaded, tricked, forced, or raped the last time they had sex. There was a longer gap in most sexually active girls' last sex than there was for boys. Given that these participants were surveyed at the beginning of their grade 8

school year, it is of note that two girls (14.3%) and 17 boys (37.8%) had penetrative sex before they started high school. Condom use at last sex was reported by 73.9% of girls (n=17) and 50% of boys (n=27). A few boys (5.6%, n=3), but no girls, reported that an oral or injectable hormonal contraceptive was used at last sex.

Logistic regression analyses (Table 5) show that for girls higher socioeconomic status and no lifetime dating experience are influential factors in lifetime experience of penetrative sex whereas age and school failure are not. Among boys, only lifetime dating experience showed a significant association with lifetime experience of penetrative sex; that is, those without dating experience were significantly less likely to have ever had any penetrative sex. Age, socioeconomic status, and school failure were not significant in the logistic regression model for boys.

Discussion

Young South African adolescents (under 16 years of age) are engaging in a variety of sexual behaviours within and outside of dating relationships. The behaviour of more than two thirds of the girls and more than three quarters of the boys are in violation of the Sexual Offences Act (Republic of South Africa 2007). More worrying is that a significant proportion of these young teens are engaging in high risk sexual behaviour, including penetrative sex, sex under the influence of alcohol or drugs, non-consensual sex, and no contraceptive use during sex. These findings indicate a need for education and health services specifically tailored for this age group to promote their sexual and reproductive health.

Young adolescents' sexual exploration is not limited to dating relationships; indeed, among boys in the sample there is a significant amount of casual sex even when they are dating. This assertion is supported by qualitative research indicating that boys may have a girlfriend and not have sex with her, but they would have sex with other girls or older women with whom they do not share a dating relationship (Jewkes, Nduna et al. 2006, Sikweyiya and Jewkes 2009). The higher number of lifetime dating partners among girls and boys suggest that those currently dating engage in a series of relationships whereas the currently non-dating boys and girls

likely engage in intermittent or occasional dating relationships if at all. Several currently dating girls and boys have multiple concurrent dating partners. Qualitative research conducted by the authors suggest that this pattern may be due in part to the fluid nature of adolescents' intimate relationships, but it should be acknowledged that adolescents do engage in multiple concurrent relationships (Harrison, Xaba et al. 2001, Harrison 2002, Jewkes and Morrell 2011). The levels of non-intercourse sexual behaviour is roughly similar to that found in the US among young teens (Sneed, Strachman et al. 2009).

Our findings have shown that girls and boys who are currently dating engage in a cluster of risk behaviours. Previous research with adolescents has found that there is significant covariance among risk behaviours including substance use, sexual behaviour, suicidality, bullying, and violence (Flisher, Kramer et al. 2000, Liang, Flisher et al. 2007, Pluddemann, Flisher et al. 2008). Age, family poverty, parent-child relationship difficulties, personality and behavioural vulnerabilities and associations with deviant peers have been found to be linked to risky sex among South African adolescents (Flisher, Kramer et al. 2000, Brook, Morojele et al. 2006, Mathews, Aaro et al. 2009). The associations between lifetime dating experience and ever engaging in penetrative sex among both boys and girls suggest that those who begin dating early in adolescence are also more likely to engage in penetrative sex at an early age. However, we should note that South African teens' motivations to engage in sex are varied and include wanting to have fun or experiment, to appear mature, to experience physical pleasure, to cope or distract from a negative state, to overcome boredom, to improve social relationships either with the partner or peers, to avoid negative social issues such as rejection, to obtain money, or because substance use was involved (Patrick, Palen et al. 2010). This complex combination of factors suggests a need for comprehensive intervention to better prepare young teens to make healthy decisions regarding their sexuality. However, the potential implications of the legislation highlighted in this paper may restrict such education to older adolescents (16 years and older) because legally young adolescents should be abstaining from all sexual behaviour. Further, even if comprehensive education were provided, young teenagers' engagement with it may be limited by their concern for being found to be in violation of this law.

There are several limitations to this study including inconsistent reporting and missing data, common features of adolescent sexuality research. In particular, sexual behaviour items for the sexually active subgroup are compromised by missing data and thus should be interpreted cautiously. Owing to this problem, the denominators are presented in each table and at times the frequencies may appear to be arithmetically incorrect, but this is a reflection of inconsistent missing data throughout the dataset. The small sample size and concentrated recruitment in one South African city limit the generalizability of these findings and conclusions; however, there is little published data describing a range of young adolescents' sexual behaviours within the context of current dating status. In addition, the differing methods of survey administration (paper-pencil vs A-PDA surveys) may have introduced some bias in the data although no significant differences in frequencies of target variables was found (analyses not reported). Future research may consider investigating a broader range of sexual behaviours, incorporating adolescent motives for engaging in these behaviours, and an investigation of potential hierarchical stages or pathways of adolescent sexual behaviour.

Conclusions

Our findings show that, regardless of legislation, young teenagers are exploring a variety of sexual behaviours, which, to a certain extent, is developmentally normative (Johnson 1999, Auslander, Rosenthal et al. 2006, Cocca 2006). The sexual encounters, often high risk, among young adolescents described here indicate a need for appropriate and comprehensive education that will empower, guide, and support adolescents in sexual decision-making. Unfortunately, the current Sexual Offences Act (Republic of South Africa 2007) may inhibit such comprehensive services and may serve as a barrier to adolescent help-seeking. Abstinence-only education has been shown to be ineffective in delaying sexual debut, reducing sexual risk behaviour, or reducing the risk of HIV infection, whereas comprehensive sex education programmes have shown an increased likelihood in delaying sexual initiation and reduced likelihood of teen pregnancy (Sather and Zinn 2002, Starkman and Rajani 2002, Underhill, Operario et al. 2007, Kohler, Manhart et al. 2008). Awareness or knowledge alone is unlikely to result in behaviour change (Hartell 2005); therefore, a comprehensive sex education programme should include

sexual decision-making and negotiation skills and opportunities for adolescents to critically examine and challenge social scripts and peer pressures related to the whole spectrum of sex as well as the multiple motivations related to having sex or not having sex. Others have suggested similar comprehensive interventions that acknowledge the complexities of adolescents' environments to promote sexual safety (Fantasia and Fontenot 2011). Our findings suggest that such education should be provided during pre-adolescence and early adolescence regardless of the dating status of the teens; however, the currently dating group appear to be at increased risk for engaging in penetrative sex during early adolescence and therefore may need additional education and health services.

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Competing interests

AG co-authored an expert opinion as evidence for a legal case challenging sections of the Sexual Offences legislation that criminalise consensual sexual activity between young adolescents.

AG, RJ, and CM are currently involved in developing school-based interventions in South Africa that address adolescent sexuality to some extent.

All authors were involved in the larger intervention development and evaluation study. There are no financial competing interests.

Authors' contributions

AG conceptualised the analysis and manuscript, conducted the analysis and interpretation, and lead the drafting and revisions of the manuscript. CM and RJ provided guidance throughout the conceptualisation, analysis, interpretation, and writing stages of this manuscript. PM and MR provided feedback and revisions on later drafts of this manuscript. All authors were involved in all stages of the larger intervention development study from which these data are drawn. All authors read and approved the final manuscript.

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Table 1. Sociodemographic and risk behaviour description of sample

		Girls (n=282)					Boys (n=190)				
		Dating (n=124)		Non-dating (n=156)		p	Dating (n=90)		Non-dating (n=100)		p
		Mean	% (freq)	Mean	% (freq)		Mean	% (freq)	Mean	% (freq)	
Age		14.23		13.94		0.041	14.28		14.18		0.266
SES (Live in a brick house)			54.0 (67)		66.5 (103)	0.092		65.2 (58)		67.0 (67)	0.844
Race	Black		39.5 (49)		34.2 (53)	0.533		47.8 (43)		28.0 (28)	0.145
	White		9.7 (12)		15.5 (24)			7.8 (7)		14.0 (14)	
	Coloured or Indian		50.8 (63)		50.3 (78)			44.4 (40)		58.0 (58)	
Days absent		0.45		0.37		0.363	0.37		0.48		0.360
Ever repeated a school year			12.9 (16)		7.7 (12)	0.020		20.2 (18)		11.0 (11)	0.051
Binge drinking (past 3 months)			21.1 (26)		5.8 (9)	0.075		16.7 (15)		3.0 (3)	0.092
Drug ^a use (past 3 months)			7.4 (9)		1.9 (3)	0.173		9.1 (8)		4.0 (4)	0.267

^aMarijuana and/or methamphetamine

Table 2. Description of number of dating partners and sexual partners

		Girls (n=282)					Boys (n=190)				
		Dating (n=124)		Non-dating (n=156)		p	Dating (n=90)		Non-dating (n=100)		p
		Mean (SD)	% (freq)	Mean (SD)	% (freq)		Mean (SD)	% (freq)	Mean (SD)	% (freq)	
Number of dating partners ever had	0		0.0 (0)		44.5 (69)	0.000		0.0 (0)		23.0 (23)	0.014
	1		22.2 (26)		25.2 (39)			18.4 (16)		26.0 (26)	
	2 or more		77.8 (91)		30.3 (47)			81.6 (71)		51.0 (51)	
	Total	1.78 (0.42)		0.86 (0.86)		0.000	1.82 (0.39)		1.28 (0.82)		0.004
Number of current dating partners	0		0.0 (0)		100.0 (156)	-		0.0 (0)		100.0 (100)	-
	1		75.8 (94)		0.0 (0)			68.9 (62)		0.0 (0)	
	2 or more		24.2 (30)		0.0 (0)			31.1 (28)		0.0 (0)	
	Total	1.24 (0.43)		0 (-)		-	1.31 (0.47)		0 (-)		-
Number of sex partners in the past 3 months	0		58.8 (10)		87.5 (7)	-		50.0 (17)		88.9 (16)	-
	1		41.2 (7)		12.5 (1)			29.4 (10)		11.1 (2)	
	2 or more		0.0 (0)		0.0 (0)			20.6 (7)		0.0 (0)	
	Total	0.20 (0.41)		0.05 (0.28)		0.193	0.47 (0.71)		0.06 (0.24)		0.006

Table 3. Comparisons of currently dating and non-dating adolescents' sexual behaviour

		Girls				Boys			
		Total (n=282)	Dating (n=124)	Non-dating (n=156)	p	Total (n=190)	Dating (n=90)	Non-dating (n=100)	p
		% (freq)	% (freq)	% (freq)		% (freq)	% (freq)	% (freq)	
Kiss	Past 3 months	45.0 (126)	78.2 (97)	18.6 (29)	0.000	65.8 (125)	88.9 (80)	45.0 (45)	0.000
	Ever	71.4 (200)	91.1 (113)	55.1 (86)	0.000	88.4 (168)	98.9 (89)	79.0 (79)	0.001
Light petting	Past 3 months	12.8 (36)	22.6 (28)	4.5 (7)	0.000	23.3 (44)	36.0 (32)	12.0 (12)	0.003
	Ever	29.4 (82)	42.3 (52)	18.2 (28)	0.000	45.2 (85)	55.1 (49)	36.4 (36)	0.028
Heavy petting	Past 3 months	6.4 (18)	8.9 (11)	3.8 (6)	0.139	10.6 (20)	21.3 (19)	1.0 (1)	0.001
	Ever	11.8 (33)	18.9 (23)	5.8 (9)	0.021	19.5 (37)	33.3 (30)	7.0 (7)	0.000
Oral sex	Past 3 months	2.8 (8)	6.5 (8)	0.0 (0)	0.002	4.8 (9)	7.8 (7)	2.0 (2)	0.061
	Ever	3.9 (11)	8.1 (10)	0.6 (1)	0.007	13.8 (26)	20.2 (18)	8.1 (8)	0.011
Vaginal sex	Past 3 months	4.6 (13)	9.8 (12)	0.6 (1)	0.002	10.5 (20)	21.1 (19)	1.0 (1)	0.003
	Ever	9.3 (26)	16.4 (20)	3.8 (6)	0.005	30.0 (57)	43.3 (39)	18.0 (18)	0.005
Anal sex	Past 3 months	1.1 (3)	2.4 (3)	0.0 (0)	0.085	7.4 (14)	13.3 (12)	2.0 (2)	0.007
	Ever	1.4 (4)	3.3 (4)	0.0 (0)	0.037	10.5 (20)	15.6 (14)	6.0 (6)	0.010
Any penetrative sex ^a	Past 3 months	6.4 (18)	13.8 (17)	0.6 (1)	0.001	16.9 (32)	31.1 (28)	4.0 (4)	0.000
	Ever	11.8 (33)	21.1 (26)	4.5 (7)	0.002	34.0 (64)	49.4 (44)	20.2 (20)	0.002

Alcohol use during sex (past 3 months) ^b	Participant	7.7 (1)	8.3 (1)	0.0 (0)	0.770		29.6 (8)	29.2 (7)	33.3 (1)	0.885
	Partner	20.0 (3)	21.4 (3)	0.0 (0)	0.678		25.0 (7)	19.2 (5)	100 (2)	0.017
	Either	15.8 (3)	16.7 (3)	0.0 (0)	0.704		33.3 (11)	32.1 (9)	40.0 (2)	0.754
Drug ^c use during sex (past 3 months) ^b	Participant	5.3 (1)	5.6 (1)	0.0 (0)	0.803		15.2 (5)	14.3 (4)	20.0 (1)	0.755
	Partner	15.8 (3)	16.7 (3)	0.0 (0)	0.504		0.0 (0)	0.0 (0)	0.0 (0)	-
	Either	15.8 (3)	16.7 (3)	0.0 (0)	0.504		15.2 (5)	14.3 (4)	20.0 (1)	0.755
Any substance ^d use during sex (past 3 months) ^b		21.1 (4)	22.2 (4)	0.0 (0)	0.597		33.3 (11)	32.1 (9)	40.0 (2)	0.754

^aOral, vaginal, or anal sex

^bOnly learners who reported that they had penetrative sex in the past 3 months were eligible to respond to these variables

^cMarijuana and/or methamphetamine

^dAlcohol, marijuana, and/or methamphetamine

Table 4. *Description of last sexual encounter for participants who have had sex^a*

		Girls (n=33)	Boys (n=64)
		% (freq)	% (freq)
Last sex partner	Girlfriend / Boyfriend / Partner	79.2 (19)	46.3 (25)
	Friend	12.5 (3)	24.1 (13)
	Family member	0.0 (0)	3.7 (2)
	Friend of family	0.0 (0)	3.7 (2)
	Person from area	8.3 (2)	22.3 (12)
Last sex consent	Willing	70.8 (17)	82.0 (41)
	Persuaded or tricked	20.8 (5)	12.0 (6)
	Forced or raped	8.3 (2)	6.0 (3)
Last time had sex	<4 weeks ago	28.6 (4)	37.8 (17)
	1-6 months ago	57.1 (8)	24.4 (11)
	More than 6 months ago	14.3 (2)	37.8 (17)
Contraception at last sex	No method	26.1 (6)	44.4 (24)
	Condom	73.9 (17)	50.0 (27)
	Pill or injection	0.0 (0)	5.6 (3)

^aThere was substantial missing data for the variables described in this table; the percentages reflect the frequency of responses among the valid responses for each variable. Because of the importance of and interest in these variables, the data are presented, but caution is recommended in interpretation.

Table 5. *Factors associated with ever having penetrative sex for girls and boys*

	Girls			Boys		
	OR	95% CI	p	OR	95% CI	p
Age	1.354	0.562 – 3.263	0.450	1.331	0.747 – 2.371	0.286
SES (Live in a brick house)	2.592	1.244 – 5.402	0.017	0.831	0.197 – 3.506	0.774
Ever repeated a school year	2.823	0.614 – 12.972	0.155	1.588	0.710 – 3.554	0.222
Never dated	0.330	0.143 – 0.761	0.016	0.162	0.049 – 0.537	0.008

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CHAPTER 6

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CHAPTER 6

Integrating Narrative: Discussion of findings and implications for intervention development

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This thesis aimed to contribute a nuanced understanding of contemporary South African adolescents' intimate relationships for the purpose of informing intervention development in low resource settings. Overall, there are points of congruence between adolescent sexuality and intimate partner violence research literature and the findings in this thesis. The unique contribution of this thesis to the literature includes: (a) guidance for public health intervention development particularly in low and middle income countries (LMICs) (Chapter 2 and 6); (b) insight into the micro-dynamics of contemporary South African adolescents' intimate relationships in terms of their ideas, experiences, and practices within them (Chapter 3); (c) an understanding of the relationship factors that influence older adolescents' relationship assessments (Chapter 4); and (d) description of the prevalence of young adolescents' engagement in sexual behaviours ranging from kissing to intercourse and factors associated with early penetrative sex experience (Chapter 5). The findings described and discussed in detail in Chapters Two through Five give insight into the dating world of South African teenagers which hold several implications for intervention programmes.

This thesis used a combination of qualitative and quantitative data. Both paradigms are concerned with obtaining good quality data, conducting objective analysis of the data, and drawing conclusions from these findings. However, how these steps are operationalized differs for each tradition. Whereas qualitative research aims to understand people's experience, conceptualisations, and motivations related to the studied phenomenon, quantitative research aims to estimate the true extent of a phenomenon in a population. Despite epistemological

differences of these approaches, mixed method research is increasingly recognised as valuable to build in-depth understanding of public health issues and interventions as evidenced by best practice guidelines published by NIH (Creswell, Klassen, Piano Clark, & Clegg Smith, 2011). In this thesis, quantitative data gave insight into the extent of adolescents' involvement in dating relationships, sexual behaviour, and intimate partner violence (Chapters 4, 5) as well as models of good relationships (Chapter 4). Qualitative data gave us insight into the microdynamics of adolescents' dating relationships (Chapter 3) such as the fluidity of these relationships, the value of these relationships in adolescent peer culture, and the gendered nature of teenagers' relationship practices. In combination, the qualitative data provided some contextual detail to understand quantitative findings and both types of data triangulate to provide a richer understanding of adolescent dating.

This chapter will begin with an overview of the main findings of the thesis and how they contribute to the literature on adolescents' dating relationships. I will then discuss the findings from each thesis chapter as a unified body of work and examine the implications for the approach, content, design, and development of interventions with a particular focus on programmes that directly engage with adolescents. The chapter will consider the limitations of this body of work and offer suggestions for directions of future research to continue to build our understanding of the nature of teenagers' romantic relationships and developing interventions to guide and support teens in this sphere of their lives. Finally the chapter ends with some conclusions drawn from the thesis findings.

Contributions of Thesis Findings to the Literature

The high levels of HIV and violence among youth (presented in Chapter 1) indicate the need for prevention interventions specifically for adolescents. As illustrated in the conceptual framework presented in Chapter One, intimate partner violence prevention interventions must be informed by existing evidence-based interventions and a nuanced understanding of adolescents' intimate relationships. However, there are very few evidence-based interventions available globally that effectively prevent intimate partner violence among teens and there is a particular paucity of research on such interventions in South Africa. Therefore, in the absence

of rigorously evaluated, effective interventions in low and middle income countries, this thesis offered an evidence-informed guide for the design and development of school-based violence prevention programs (Chapter 2). In addition, this thesis has made contributions to build a better understanding of local, contemporary adolescents' intimate relationships specifically their conceptualisations and constructions of these relationships (Chapter 3), their ideas about good relationships (Chapter 4), and their sexual behaviours in relation to dating (Chapter 5). Specifically, teenagers' relationship ideas and practices were found to be highly gendered, heavily influenced by peer involvement and pressure, and relatively fluid (Chapter 3). Sex and violence were common themes in these ideas and practices. No teens want to be in violent relationships and yet, in practice, they do occur and are maintained for various reasons (Chapter 3). Views and practices on sex were more varied; that is, some teens appear to want to engage in sexual exploration, others believe they have to engage in sexual behaviours in order to get or keep a partner, and others still preferred not to engage in sex yet (Chapter 3). In practice, data show that adolescents do engage in a variety of sexual behaviours both with dating partners and other, non-dating partners (Chapters 4 and 5). Interestingly, neither sex nor violence appeared to impact on older adolescents relationship assessments (Chapter 4).

The adolescent intimate relationships literature is dominated by research from the global North and particularly North America. The studies in this thesis contribute knowledge about South African teenagers' romantic relationships; the specific findings are summarised in Table 1 organised by chapter and then a more detailed, thematic discussion of the overall findings are discussed below.

Table 1. Summary of gaps in the literature and findings in this thesis that contribute to the adolescent intimate relationships research evidence

<i>Topic</i>	<i>Gaps to be addressed in this thesis</i>	<i>Brief summary of main findings</i>
Adolescent intimate relationship research	Contribute evidence from South African adolescents' intimate relationships.	The nature of South African teenagers' dating relationships is explored in this thesis. (Chapters 3, 4, 5)
	Consider the differences and similarities between	Older adolescents reported more complex relationship ideas and

	groups of teenagers at different developmental stages.	practices, more frequent contact and couple-only activities, and greater involvement in sex than younger teenagers did. Older teenagers' relationship assessments are analysed. Younger teens' engagement in a variety of sexual behaviour is explored. (Chapters 3, 4, 5)
Evidence-based violence prevention interventions in high schools	Develop a guide to designing school-based violence prevention interventions for adolescents in LMICs.	Characteristics of non-violent schools and successful interventions can guide intervention development in LMICs. In addition, programme developers must consider the scope and target groups or environments for the intervention. Specific recommendations on the design, approach, and content of violence prevention interventions are discussed. (Chapters 2, 6)
Contemporary adolescents' conceptualisations and constructions of intimate relationships	Describe the micro-dynamics of adolescents' intimate relationships – how they think about, engage in, and experience these relationships.	Adolescents' reports indicated a great interest in romantic relationships and described fluid, informal dating relationships that were highly influenced by gender roles and peer culture. These micro-dynamics have an impact on communication and decision-making within these relationships. (Chapter 3)
	Explore adolescents' conceptualisations of good or positive intimate relationships.	Girls valued having a mutual main partnership with an older, educated boyfriend in which they openly discussed sexual and reproductive health matters. Boys on the hand valued a mutual main partnership in which there was little or no quarrelling. Girls and boys who reported being in good relationships were less likely to report ever using drugs and boys were additionally more likely to report using a condom with their partner at last

		sex. (Chapter 4)
Sexual behaviour and intimate relationships	Describe the extent to which young adolescents engage in a variety of sexual behaviours and how their dating status impacts on levels of experience. Identify factors influencing engagement in penetrative sex in this age group.	Sex was a predominant theme in younger and older adolescents' discussions and similar to the power dynamics in the relationship overall, boys held more power in sexual and reproductive health matters in the relationship (Chapter 3). Younger adolescents reported more engagement in lower hierarchy sexual behaviours including kissing and petting. Fewer, though not an insignificant proportion, of young teens also reported engaging in penetrative sex including oral, vaginal, and anal intercourse. Currently dating girls and boys in general reported greater involvement in all sexual behaviours. There were concerning reports of engagement in high risk sexual behaviour including penetrative sex, co-occurring sex and substance use, casual sex, and few sexually experienced teens using contraception. Teens who had never dated were less likely to have engaged penetrative sex. (Chapter 5)

A gap in the current global and local literature is a developmentally sensitive understanding of adolescents' dating relationships; that is, the differences and similarities of the romantic relationship ideals, conceptualisations, behaviours, and forms of younger compared to older teens as well as an understanding of sociocultural influences on the developmental progression of adolescents' involvement in dating relationships. Over the course of adolescence, individuals mature physically, psychologically, cognitively, and socially as well as increase their social competencies as they transition into adulthood. Therefore, it is likely that the nature of intimate relationships also changes over this developmental period. The

findings in this thesis suggest that the gender role norms, labelling serious and casual types of relationships, and the assumption that boys expected to engage in sexual behaviours with their intimate partners were common among younger and older teenagers (Chapter 3). However, reports of the meaning, complexity, amount of contact, types of couple activities, and actual engagement in sexual discussions and behaviours were different; older adolescents reported more complex relationship ideas and practices, more frequent contact and couple-only activities, and greater involvement in sex (Chapter 3). This thesis has contributed some nuanced understanding of the similarities and differences of younger and older adolescents' romantic relationship conceptualisations and constructions. Further, although the general practices of dating, engaging in various sexual behaviours, and experiences of intimate partner violence are common in various cultural groups as evidenced in local and international research, the microdynamics, conceptualisations, and extent of involvement are not globally homogenous. For example, the data presented in this thesis suggest that South African adolescents engage in less formal, more nebulous dating than those in the global North (Chapter 3). However, similar to adolescents in North America and Western Europe, local teenagers engage in a variety of sexual behaviours and many are sexually active in late adolescence (Chapters 4 and 5).

Several local and international researchers have written about the role of peer influence in adolescence more broadly and within dating relationships, primarily exploring peer pressure and risk behaviour (Campbell & MacPhail, 2002; Harrison, Xaba, & Kunene, 2001; MacPhail & Campbell, 2001; Roisman, Booth-LaForce, Cauffman, & Spieker, 2009; Selikow, Ahmed, Flisher, Mathews, & Mukoma, 2009). In this thesis study, younger and older adolescents' reports described the peer group, and friends in particular, as primary socialisation agents regarding dating and sex even though older adolescents acknowledged that their peers and friends may be just as inexperienced as they themselves were (Chapter 3). Friends, and at times the larger peer group, become involved throughout a teenager's romantic relationship including advice on partner selection, mediating relationship initiation processes, and passing messages between partners – even ones that aim to terminate the relationship (Chapter 3). Research with African American adolescents and young South African teenagers in Cape Town have similarly found that peers

are the preferred source of information and advice as they navigate romantic interactions (Harper, Gannon, Watson, Catania, & Dolcini, 2004; Selikow et al., 2009). Further, younger and older teens noted the social status from peers rewarding involvement in a dating relationship and, particularly among boys, being sexually active (Chapter 3). This finding too corresponds to research findings abroad and locally (Harper et al., 2004; Harrison et al., 2001; Jewkes & Morrell, 2012; Selikow et al., 2009; Wood & Jewkes, 2006). The findings in this thesis also suggest that the pressure and potential rewards among peers may partially eclipse adolescents' engagement in the dating relationship beyond its initiation because it is not a healthy or good relationship that is rewarded, but merely having a relationship with additional rewards for having a very desirable partner (Chapter 3). Therefore, the findings in this thesis have contributed to the literature by confirming international and local research findings with a local group of adolescents and further demonstrating how peer involvement affects both younger and older teens' romantic relationships. Further, the findings have elaborated on the significance of peer culture in adolescents' behaviour within and motivations to engage in intimate relationships.

The impact of gender on adolescents' dating relationships has been discussed throughout the thesis. Previous research has noted the impact of gender constructions on vulnerabilities within the relationship specifically related to intimate partner violence and poor sexual and reproductive health outcomes (Harrison, Xaba, Kunene, & Ntuli, 2001; Jewkes, 2002; Jewkes, Vundule, Maforah, & Jordaan, 2001). Gender plays a big role in South African adolescents' ideas about and practices within intimate relationships. Older and younger teenagers' descriptions indicate relatively traditional gender roles in their relationships that ascribe powerful leadership positions to the boyfriend and a more passive role to the girlfriend (Chapter 3). These roles permeate all facets of these relationships including relationship initiation, relationship type, activities the couple engage in, and sex (Chapter 3). Such gender roles in teenagers' dating relationships have similarly been described in studies of adolescents in other areas of South Africa (Harrison et al., 2001; Jewkes, Dunkle, Nduna, & Shai, 2010; Jewkes et al., 2001) and internationally (Noonan & Charles, 2009; O'Sullivan, 2005). These gender roles limit girls' agency

and confidence in decision-making and building the kind of relationship they want and promote a gendered relationship style becoming a normative pattern throughout their adolescent and adult relationships (Chapter 3). Of particular concern is the impact that such gender roles and inequity have in contributing to an increased risk of intimate partner violence (Jewkes, 2002). We also see gendered patterns in terms of girls typically dating older boys (Chapter 3, 4; Wood & Jewkes, 1997), and differences in engagement in risk behaviour (Chapter 3, 5) and relationship values (Chapter 3, 4). It should be noted, however, that the trend of having older partners discussed in this thesis does not necessarily refer to the “sugar daddy” phenomenon described in other studies (Jewkes & Abrahams, 2002; Kaufman & Stavrou, 2004; Luke, 2005; Silberschmidt & Rasch, 2001). Indeed, girls in the qualitative interviews (Chapter 3) described dating boys who were one or two grades ahead of them at school which is typically 1-3 years older and the data presented from older adolescents also suggests that boyfriends were on average 3 years older than the girls in the study (Chapter 4). Given the developmental progression during adolescence, an age difference of two years or more, particularly among younger teens, can be a significant difference that may intensify the power differential and relationship progression if one partner has developmentally more mature expectations of a relationship in terms of how much and by what means they communicate, the kinds of activities they engage in together, and the power to drive the relationship in these directions. The similarities and differences in older girls’ and boys’ relationship conceptualisations are also highlighted in Chapter Four. In addition, girls were more likely to report their desire to find a long-term partner in comparison to boys who saw their adolescent relationships as primarily exploratory with the hopes of engaging in sexual activity (Chapter 3). Very little research has investigated the nuances of the differences and similarities between girls’ and boys’ romantic relationship ideas and motivations (see Jewkes & Morrell, 2012; Jewkes, Wood, & Duvvury, 2010 for examples). This thesis presented findings about gender norms in teens’ relationships congruent with local and global research and further made a contribution by elaborating on the gender dynamics influencing both younger and older adolescents’ conceptualisations and constructions of dating relationships.

The findings in this thesis make further contributions to our understanding of the nature of teenagers' romantic relationships and their concepts and experiences of them. Specifically, adolescents' discussions describe very informal typical dating relationships (Chapter 3) and older girls' and boys' relationship assessments (Chapter 4). Barter (2009) has written about British teens' relationships being less formal than those of North American teenagers. Very little local work has explored the structure of such relationships among South African adolescents beyond describing characteristics of relationships that are influential in teens' sexual and violent behaviours and experiences. Interviews with younger and older adolescents conducted for this thesis revealed a lack of structure and significant fluidity of their romantic relationships (Chapter 3). Research with adolescents in other areas of South Africa have noted the fluidity of relationship termination in that often adolescents do not formally end their relationship in case they wished to continue the relationship with that partner at a later stage (Jewkes & Morrell, 2012; Wood & Jewkes, 2001). This fluidity may make different kinds of multiple concurrent partnerships more likely even though teens reported the desire for monogamous relationships (Chapter 3). The practice of multiple concurrent partnerships and typical stated desire for monogamy among adolescents has been described in research in other parts of the country (Harrison, 2002; Harrison et al., 2001; Jewkes & Morrell, 2012). Older adolescents' conceptualisations of good relationships were also examined in this thesis, which addresses a question that few local or international researchers have explored. Specifically, both girls' and boys' valued having a mutual main partnership with their dating partner, but the additional values – having an educated boyfriend and open communication for girls, and little or no quarrelling for boys – were different (Chapter 4). Notably, intimate partner violence, sexual activity, relationship conflict, and general positive communication skills did not significantly influence these older teens' relationship assessments (Chapter 4). The in-depth description of younger and older teenagers' nebulous relationships including the impact on different facets of the relationship and their behaviour, and the investigation of older adolescents' relationship assessments contributed new knowledge to a more nuanced understanding of younger and older adolescents' lived experiences of intimate relationships. These findings provided insight into teenagers' conceptualisation of and values within romantic relationships.

Although there is a sizeable body of local and international literature investigating adolescent sexual behaviour, most of this research has focused on sexual intercourse (Kaaya et al., 2002). Very little is known about teens' engagement in a variety of non-penetrative and penetrative sexual behaviours, particularly among younger teenagers. This topic is particularly relevant in South Africa currently because sections of the Sexual Offences Act (Republic of South Africa, 2007) criminalise consensual sexual activity among similar-aged adolescents between the ages of 12 and 16 years and mandate all adults to report such behaviour when they become aware of it. These sections jeopardise provisions made in the Children's Act (Republic of South Africa, 2005) and Choice on Termination of Pregnancy Act (Republic of South Africa, 1996) allowing young adolescents access to sexual and reproductive health services without parental consent (McQuoid-Mason, 2011). Any healthcare professionals providing these services are legally mandated to also report these adolescents even though they are seeking healthcare to promote their sexual health while they engage in consensual, developmentally normative behaviour (Auslander, Rosenthal, & Blythe, 2006; Waylen, Ness, McGovern, Wolke, & Low, 2010; Welsh, Haugen, Widman, Darling, & Grello, 2005). Findings in this thesis indicate that younger adolescents engage in a variety of sexual behaviours; lower hierarchy behaviours such as kissing and petting are more common than penetrative sex including oral, vaginal, and anal intercourse (Chapter 5). These findings together with other research (Mathews et al., 2009) indicate that many young South African teenagers are exploring their sexuality by engaging in various sexual behaviours with a partner either within or outside of a dating relationship. They contribute to answering a gap in the literature about the extent of young adolescents' involvement in a variety of sexual behaviours and the association between dating and such behaviours.

Implications for Intervention Development

The insights into school-based violence prevention interventions and adolescents' ideas, experiences, and behaviours in their intimate relationships have raised multiple issues that should inform intervention developers in efforts to design effective and accessible programmes that will engage adolescents in topics pertinent

to intimate partner violence prevention and the promotion of healthy intimate relationships. These implications are summarised in Table 2 and discussed in detail below.

Table 2. Summary of implications of main findings for intervention

<i>Thesis chapter</i>	<i>Findings in thesis</i>	<i>Implications for intervention</i>
2	Very few RCTs evaluating interventions in LMICs.	Integrate feasible monitoring and evaluation activities in intervention programmes and consider evidence from non-RCT evaluations of programmes in LMICs.
2	Very few evidence-based interventions available for LMIC contexts.	Replicate characteristics of non-violent contexts and successful interventions.
		Adapt international evidence-based interventions for local settings.
		Partner with local stakeholders to design interventions to improve buy in, acceptability, and relevance.
2, 3, 4, 5	Choosing comprehensive vs specific content.	Targeted issues (e.g., intimate partner violence) are often complex and interwoven with other concerns; therefore, interventions should consider addressing multiple risk factors and the interrelationship between them (a more comprehensive approach).
2	Choosing whole school vs discrete approach.	Creating environments and networks supportive of healthy, prosocial behaviours will reinforce the maintenance of them (a whole school approach).
3, 5	Several adolescents become involved in dating and sexual relationships at an early age.	Prevention interventions should target young groups of teenagers (e.g., 12-14 years old) when they begin to explore intimate relationships and sex to support healthy relationship norms and teaching important relationship skills.
3, 4, 5	Almost all adolescents describe an interest in dating relationships and almost all will become involved in dating or sexual relationships at some point during adolescence.	Although particular groups of teenagers may be at increased risk for experiencing abusive relationships or unsafe sex, interventions should engage all adolescents.
3, 5	Some adolescents, particularly	Interventions should make

	among younger groups, do not get involved in dating or sexual relationships.	programme material, concepts, and skills relevant and accessible to adolescents with various types and levels of relationship experience including those with no dating or sexual experience.
2, 3, 4, 5	The nature of dating relationships and norms of them change at different stages of adolescent development.	Interventions should be developmentally sensitive to make material accessible to and appropriate for different age groups of teens.
		Interactive and participatory intervention sessions are more likely to engage adolescents.
2, 3	Adolescents' nebulous relationship contexts influence their behaviours within and ideas about them making open communication, collaborative decision-making, and building healthy relationships challenging	Intervention concepts and skills should be appropriate and relevant to adolescents' lived experiences of dating relationships, particularly the fluid nature of them. A participatory approach will allow adolescents to engage with intervention material and, through practice, adapt them to be useful in their dating contexts.
3	Adolescents enjoy discussing intimate relationships in a non-punitive, non-judgemental setting.	Interventions should promote critical reflection and engagement with concepts about dating and relationships to help adolescents challenge problematic norms and assumptions that may put them at risk. Such critical engagement is best promoted through an interactive and participatory intervention style rather than a didactic approach.
3	Adolescents rely on many problematic assumptions and peer lore to guide their decision-making and behaviour in intimate relationships.	
3, 4	Several normative conceptualisations and practices within intimate relationships put teens at risk for adverse experiences or outcomes.	
2, 3, 4, 5	Adolescents have few ideas of how to create healthy relationships or how to put their ideas about such relationships into action.	Interventions should focus on providing opportunities for adolescents to learn and practice important relationship skills that are relevant to their relationship contexts. In particular, open communication, collaborative decision-making, negotiations about sex, and how to get to know one another would be useful to prevent abusive or risky relationships and promote healthy ones.
3, 4	There is very little open communication in relationships and too much reliance on assumed beliefs and expectations, peer lore, and gender roles.	
3, 4, 5	Adolescents' relationships are	Interventions should address gender

	highly gendered in terms of expected gender roles and norms within them and also differences between boys' and girls' ideas and behaviours.	issues and promote gender equity in relationships.
2, 3, 5	Many adolescents assume sex is expected in intimate relationships and several are engaging in sexual relationships.	Comprehensive sexual and reproductive health education and services are needed to help adolescents of all ages develop an understanding of their own sexuality, make decisions about their engagement in sexual behaviours, and develop skills to negotiate safe sex behaviours.

Structuring school-based violence prevention interventions

As noted in Chapter One, the literature in South Africa indicates that a worrying proportion of adolescents are experiencing intimate partner violence (Dunkle et al., 2006; Flisher, Myer, Marais, Reddy, & Lombard, 2007; Jewkes et al., 2010) and thus prevention interventions are needed. Schools provide an opportunity to reach the majority of youth in South Africa, particularly in earlier high school grades (Chapter 2; Department of Education, 2007; Flisher et al., 2000). Internationally, the gold standard for intervention programmes is those that have evidence from rigorous randomised control trials (RCTs) indicating their efficacy and effectiveness. However, very few RCTs have been conducted for violence prevention interventions in low and middle income countries (LMICs) resulting in no current evidence-based intimate partner violence prevention interventions for high school settings (Chapter 2). In the absence of such programmes being readily available, intervention developers in South Africa and other LMICs can (a) consider local programmes that have evaluation data albeit not from RCTs, (b) replicate characteristics of non-violent schools, (c) be guided by characteristics of successful interventions, (d) adapt international evidence-based interventions for local settings, (e) partner with local stakeholders to design interventions which will improve buy in, acceptability, and relevance, and (f) integrate monitoring and evaluation strategies to build an evidence base for new interventions (Chapter 2).

Intervention developers also need to choose an approach for their programme that can range from a multi-level whole school approach to a concentrated, discrete approach; however, there is no research evidence to suggest that either approach is always more effective (Chapter 2). A theoretical model of the causes of intimate partner violence (Jewkes, 2002) explains that broader factors influence individuals' abusive behaviour or experiences including gender inequality and a culture of violence suggesting that intervention efforts should attempt to address these issues at the multiple levels that may support them including individual youth and staff attitudes and behaviour as well as school policies related to violence and equality. Chapter Two argues that a whole school approach has the added advantage of creating environments and networks that support healthy, prosocial norms that will encourage positive change and support the maintenance of this change at an individual level. In addition, the creation of such health-promoting and safe environments may have the added benefit of improved attendance and academic achievement.

Engaging adolescents in developmentally appropriate interventions focused on intimate relationships

Intervention developers also need to be informed by a nuanced understanding of the nature of the audience and the issues that they plan to target. Interventions must be sensitive and responsive to adolescents' physical and psychosocial development and particularly to the many changes individuals experience during this transition from childhood to adulthood (Auslander et al., 2006; Collins, 2003; Roisman et al., 2009; Welsh et al., 2005; Zimmer-Gembeck, 2002; Zimmer-Gembeck & Helfand, 2008). This knowledge can help to inform intervention content; for example, dating relationships and friendships are important developmental foci during this period as confirmed in Chapter Three. Further, this knowledge can also guide how to structure the intervention. For example, a developmental perspective that is sympathetic to adolescents' typical desires for independence and individuation suggests that interventions should choose less of a hierarchical expertise approach of telling participants what to do or think and more of a collaborative approach. Indeed, intervention research has recommended a more interactive and participatory approach that provides teens with opportunities for

critical engagement with concepts and beliefs and also for building and practicing relevant skills instead of a didactic or knowledge-based approach (Chapter 2; Jewkes, 2010; Jewkes, Morrell, & Christofides, 2009).

A developmentally sensitive intervention must also consider how to reach teens at different developmental stages especially because the issues faced, psychosocial and cognitive resources available, and what may be considered normative versus high risk changes significantly over the course of adolescence. As noted in Chapter One, what may be considered normative among older teens in terms of their dating relationships may be considered risky for young teenagers. Although an interest in dating and other attitudes to these relationships are common among both younger and older adolescents (Chapter 3), there are important age or developmental differences that must be considered in developing our understanding of their intimate relationships (Collins, 2003; Collins & Laursen, 2004). Although younger and older adolescents' describe having either casual or serious intimate relationships, the nature of them differed between these two groups (Chapter 3). Specifically, the complexity and meaning of the relationships increased with partners having more frequent and sustained contact, engaging in more couple-only activities, and more likely to become sexually active among older adolescents (Chapter 3). Gender norms and boys' assumed expectation to have sex with a partner were common to both younger and older adolescents' intimate relationships (Chapter 3). These differences highlight the importance of designing developmentally sensitive interventions that address issues and build skills relevant to the developmental stage and norms of different groups of adolescents. Such interventions would take the view that intimate relationships are normative and healthy during adolescence albeit if the concept of what is healthy at different stages throughout adolescence changes. This perspective, also recommended in the literature (Collins, 2003; Collins, Welsh, & Furman, 2009; Collins & Laursen, 2004), would facilitate a non-judgemental atmosphere promoting teenagers' engagement and participation in the intervention.

In addition to understanding adolescent development, it is important to understand the specific issue to be addressed in the intervention. In the case of intimate partner violence, it seems essential to explore the nature of contemporary

adolescents' intimate relationships. Teenagers' discussions (Chapter 3) and ideas about these relationships (Chapters 3 and 4) as well as their behaviour within them (Chapters 3, 4, and 5) provide insight into specific intervention needs and hints at what may be most relevant and engaging to this group. Further, the findings presented in Chapters Three, Four, and Five as well as previous local research (Jewkes, 2002; Jewkes et al., 2001; Mathews et al., 2009) and discussions in Chapter Two indicate that there are multiple risk factors or potential adverse events within teenagers' dating relationships. Therefore, it seems important that intervention programmes ensure that the focus is not too narrow; that is, an intimate partner violence prevention programme cannot ignore broader relationship issues (e.g., sexuality), broader ideological issues (e.g., gender equality, peer pressure), other risk taking behaviour (e.g., substance use, other interpersonal violence), and potential skill deficits (e.g., communication and conflict resolution). Further, given the influential role of peers and peer culture in these relationships (Chapter 2; Harper et al., 2004; Jewkes & Morrell, 2012; Selikow et al., 2009; Wood & Jewkes, 2006), it seems important to broaden intervention content to include peer group relations and peer pressure. Thus interventions more toward the comprehensive end of the content continuum (Chapter 2) are likely to be useful in promoting healthy adolescent intimate relationships. Indeed, both risk prevention and health promotion messages should be integrated in intervention programmes especially to guard against an exclusive focus on adverse outcomes that may unintentionally stunt the conceptualisation of healthy norms and ideals (Chapter 2; Harrison, 2002, 2008; Harrison et al., 2001; Pettifor et al., 2005).

Intimate relationships must be addressed in adolescent health interventions. Similar to previous local studies (Flisher et al., 2007; Jewkes, Nduna, et al., 2006; Jewkes et al., 2008; Mathews et al., 2012), the findings in this thesis indicated that both younger and older teenagers in South Africa engage in dating relationships (Chapters 3, 4, 5). Many young teenagers (under 16 years old) reported having had two or more dating partners in their lifetime (Chapter 5) suggesting that intervention programmes should target adolescents from an early age in an attempt to build positive and prosocial relationships skills that may be useful in their initial intimate

relationship experiences which may grow to become normative in older adolescence and adulthood.

Findings in this thesis give insight into general dating trends among adolescents and primarily focus on those who do engage in intimate relationships and sexual behaviour (Chapters 3, 4, 5). However, it should be noted that although very many teenagers do become involved in dating at an early age, several do not as confirmed by younger and older teens' assertions described in Chapter Three and reports in Chapter Five. Nonetheless, intimate or dating relationships appear to be of great interest and importance to adolescents regardless of their dating experience (Chapter 3; Harrison et al., 2001). Indeed, these relationships play a very significant role in teen peer culture and adolescents seem to learn much about them from one another to the extent that even adolescents who had not begun dating reported similar ideas about these relationships as those reported by similar-age dating-experienced peers (Chapter 3). Further, involvement in dating and sexual activity gave teens significant rewards of peer status among all age groups; however, the level of involvement that was expected and rewarded differed among different age groups (Chapter 3; Harper et al., 2004; Harrison et al., 2001; Jewkes & Morrell, 2012; Selikow et al., 2009; Wood & Jewkes, 2006). Because many adolescents are engaging in dating and sexual relationships and even those who do not appear to be interested in them and are likely to engage in them in the future, universal-type interventions that engage with all members of the target group (ie: adolescents) instead of only those at high risk of experiencing adverse outcomes are recommended. However, such programmes must bear in mind the variance in dating and sexual experience within groups of teenagers and attempt to make content and skills accessible and relevant even to young people who have not yet had a boyfriend or girlfriend. Addressing the knowledge and skills needs of younger, inexperienced adolescents may be particularly challenging if they find the topic of intimate relationships, and especially sex, interesting but intimidating. One way to address this experience difference may be to draw links between friendships and dating relationships because many healthy relationship attitudes and skills may be common across these two types of important social relationships in young people's lives. Indeed, adolescent dating relationships may benefit from the integration of the

concept of being friends with a partner and being careful not to reinforce assumptions that sex is an essential part of young teenagers' intimate relationships. Further, as noted earlier, teenagers would benefit from engaging in peer group issues and learning skills to manage peer pressure which is likely to have a positive impact on their dating relationships.

Challenging ideas and building skills in intervention programmes

Intervention programmes' content in terms of activities and key skills must also be feasible within the context of contemporary teenagers' intimate relationships. While dialogue and role play activities may promote building links and understanding the application of intervention concepts and skills within adolescents' relationships, it is important to consider the accessibility and suitability of them during the design phase as has been similarly recommended by other researchers (Fantasia & Fontenot, 2011; Helm & Baker, 2011; Jewkes, 2010). Contemporary South African teenagers described very fluid, nebulous relationships generally with very few formalised dating activities that are often depicted in North American and Western European representations (Chapter 3). Further, local teens described that there was little open communication or collaborative decision-making between partners (Chapter 3). The younger group especially seemed to spend less time and talk less with their partners than older teens (Chapter 3). This characteristic of dating relationships indicates the complexity of adolescents' experiences and the need for relationship skills that would promote open communication and decision-making, but they must be workable in the context of such unstructured relationships.

Adding to the complexity are teenagers' concepts and ideas about intimate relationships. Discussions with teenagers suggested that there is no shared sociocultural model or schema of adolescent dating relationships and their nebulousness is further suggested by the observation that within many relationships, teen couples are unlikely to share a concept of the relationship and how it might develop (Chapter 3). It is also worrying that teenagers most often rely on assumptions or peer lore as they learn about and experience these relationships which unfortunately perpetuates problematic norms such as beliefs about sex and gender roles (Chapter 3). Teenagers' relationship values should also be carefully

examined. For example, older adolescent girls' preference for an older, educated boyfriend has been associated with HIV risk (Chapter 4; Jewkes, Dunkle, et al., 2006) and older teen boys' preference for no quarrelling with their partner is more likely if she is submissive (Chapter 4). These conceptualisations are concerning and may increase teens' risks of poor relationship experiences or outcomes. Therefore, interventions should provide opportunities for adolescents to critically engage with their concepts of healthy and unhealthy relationships so that they can challenge problematic norms and beliefs and develop shared, healthy ideas about dating relationships. Given that adolescents enjoyed discussing intimate relationships in a non-threatening (ie: non-judgemental, non-punitive) situation (Chapter 3), it seems that they would eagerly engage in such critical reflection and dialogue about their own and broader peer group attitudes about and behaviours within intimate relationships. Further, such activities may provide a model for adolescents to engage in open communication including respectfully dealing with disagreements within their relationships and it appears that this skill may improve their relationship satisfaction (Chapter 4).

The findings in this thesis have implications for the inclusion of particular themes or skills in intervention programmes that address adolescent intimate relationships. As discussed above, open communication skills are essential to promoting healthier dating relationships among teens. Unfortunately, findings in this thesis suggest that teenagers have a communication skills deficit as indicated by their descriptions of little communication between partners (particularly among younger adolescents) (Chapter 3), and older boys' particular sensitivity to arguments (Chapter 4). Communication skills will help teenagers to get to know their partners better, which adolescents reported was one of the goals of dating relationships (Chapter 3) and older girls in particular valued open communication about sexual and reproductive health matters (Chapter 4). Previous research has found that communication skills may contribute to preventing intimate partner violence and improving adolescents' subjective experiences within their relationships (Jewkes, 2002; Jewkes et al., 2010; Montesi, Fauber, Gordon, & Heimberg, 2011). Relatedly, negotiation and collaborative decision-making skills are clearly needed to help adolescents build equitable relationships with which they are comfortable; if

adolescent couples get to know one another better using improved communication skills, then they are also more likely to find common areas of interest so that they can choose activities they are both likely to enjoy.

The fluidity of adolescents' intimate relationships creates a context in which multiple concurrent relationships can develop (Chapter 3; Dunkle et al., 2007; A. Harrison, 2002; Harrison et al., 2001; Jewkes & Morrell, 2012). Findings in all the studies presented in this thesis indicate that younger and older adolescents engage in multiple concurrent partnerships (Chapters 3, 4, 5). Although teens report wanting monogamous dating relationships (Chapter 3, 4; Jewkes & Morrell, 2012), their discussions and self-report data suggest that many have multiple, hierarchical intimate relationships (Chapter 3; Dunkle et al., 2007; Jewkes & Morrell, 2012; Selikow, Zulu, & Cedra, 2002). Poor communication between partners and the reliance on assumptions and peer reports also fuel multiple concurrent partnerships with some adolescents reporting they had multiple partners because they knew their main partner had or would eventually get other partners or because each partner filled a different role (Chapter 3; Jewkes & Morrell, 2012; Selikow et al., 2002). Building a common understanding of adolescent intimate relationships may help teens to challenge multiple concurrent partner practices and communication skills will help them to discuss these views with a partner. Although younger teens in particular do not seem to be having sex with their multiple concurrent partners (Chapter 3), it is still important to address this issue in interventions because of the increased HIV risk posed by multiple concurrent partnerships among older groups (Mah & Halperin, 2010).

Multiple concurrent partners and the fluidity of adolescents' romantic relationships are often seen in a negative light owing to the HIV infection risk associated with this practice (Mah & Halperin, 2010) especially in addition to the likelihood of casual sex partnerships within the nebulous dating landscape and the difficulty of structured decision-making within such unstructured relationships. However, these practices may not necessarily be negative among younger adolescents who are not yet sexually active with their dating partners. Intervention developers should consider the positive aspects of young adolescents having a

variety of casual, fluid relationships as they begin to explore this area instead of becoming quickly immersed in a very serious relationship which they get stuck not knowing how to negotiate or end it. Therefore, intervention developers need to balance this tension in trying to promote developmentally appropriate types of relationships and preventing practices from becoming normative at a later stage when they are no longer appropriate and may be problematic.

Dominant cultural gender constructions impact younger and older teenagers' experiences of and roles within their intimate relationships (Chapter 3). The gender power differential described in this thesis (Chapter 3) and in previous research (Dunkle et al., 2006; Jewkes et al., 2010; Jewkes & Morrell, 2012; Jewkes et al., 2001) is especially problematic in terms of favouring boys' decision-making power and influence over girlfriends and increasing the vulnerabilities for intimate partner violence and poor sexual and reproductive health outcomes (Chapter 3; Jewkes, 2002). In the absence of good communication and collaborative decision-making, adolescents may rely on assumed social norms such as patriarchal gender roles within their relationships. These norms may increase their risk of adverse experiences such as intimate partner violence and risky sexual behaviour. Further, relying on assumptions means that each partner may have different relationship concepts and expectations which may compromise their satisfaction when partners do not fulfil these expectations or are coerced into situations or behaviours they do not want. There are several implications of the gendered nature of adolescents' relationships for intervention development. First, the construct of gender should be addressed to promote gender equity; adolescents should be given the opportunity to critically reflect on gender norms and how they impact on their relationships. Facilitators can guide teenagers to reflect on the diversity of actual gendered practices within relationships. Such reflection can grow into challenging gender inequalities and building more equitable expectations and behaviours. Second, developers must understand that girls' and boys' concepts of and motivations regarding dating relationships often differ and these may influence their behaviour. Therefore, material must engage both boys and girls together. Opportunities for girls and boys to engage in dialogue about their ideas and expectations may be beneficial

to help adolescents to practice communication skills and build a shared understanding of intimate relationships.

The need for comprehensive sexual and reproductive health education

Sex was a prominent theme in the findings of this thesis and adolescents showed a great interest in it (Chapter 3). Younger and older girls reported the belief that boys expected sex in relationships and while younger girls expressed a reluctance to become sexually active, some older girls disclosed that they wanted to have sex with their boyfriends (Chapter 3; Jewkes & Morrell, 2012). Younger and older boys described that although they often wanted to have sex with their girlfriends, they did not expect it (Chapter 3). Gender roles influenced sexual behaviour in that boys were expected to play the role of initiating sexual behaviour and girls had to decline or accept these advances (Chapter 3; Harrison et al., 2001).

Although teenagers assumed that their peers were sexually active, most reported that neither they nor anyone in their close group of friends were having sex (Chapter 3). Indeed, survey research indicates that, especially among younger adolescents, the majority have not experienced coital debut (Chapter 5; Flisher, Reddy, Muller, & Lombard, 2003; Jaspan et al., 2006; Mathews et al., 2009; Mathews, 2005; Pettifor et al., 2005; Pettifor et al., 2004; Simbayi, Chauveau, & Shisana, 2004). Recent research has encouraged a developmental perspective on adolescent sexuality research that balances views of sexual behaviours as negative with views that they are part of normative, healthy development (Auslander et al., 2006; Welsh et al., 2005; Zimmer-Gembeck & Helfand, 2008). Taking such a perspective requires a broader view of sexuality and specifically to consider non-intercourse sexual behaviours (Auslander et al., 2006; Sneed, Strachman, Nguyen, & Morisky, 2009; Waylen et al., 2010; Welsh et al., 2005). The extent to which dating and non-dating young adolescents engage in a variety of sexual behaviours ranging from kissing to intercourse is explored in Chapter Five. Lower hierarchy sexual behaviours such as kissing and petting are more common than oral, vaginal, or anal penetrative sex among these teens (Chapter 5). In addition, the currently dating group were a precocious group who had more dating partners in their lifetime and were more sexually experienced than their non-dating counter-parts (Chapter 5).

However, the majority of young teens had not had penetrative sex (Chapter 5). In contrast, among a group of currently dating older adolescents, the majority had intercourse with their partners (Chapter 4). But sexual intercourse does not only occur between dating partners; some younger and older adolescents engage in casual sex (Chapter 3, 5). Whereas lower hierarchy sexual behaviours such as kissing and touching may be considered developmentally normative among younger and older adolescents, it should be noted that penetrative sex is particularly high risk for younger adolescents (Christofides, 2012; Ciairano, Bonino, Kliwer, Miceli, & Jackson, 2006; Collins, 2003; Harrison, Cleland, Gouws, & Frohlich, 2005; Jewkes et al., 2001; Mathews et al., 2009; Pettifor, van der Straten, Dunbar, Shiboski, & Padian, 2004; Shulman, Walsh, Weisman, & Schelyer, 2009; Wand & Ramjee, 2012; Zimmer-Gembeck & Helfand, 2008). Further, it is extremely concerning that several young teens reported engaging in additional high risk sexual behaviour including concurrent substance use and sex, non-consensual sex, and no contraceptive use (Chapter 5). Interventions should be cognizant of a developmental perspective of adolescent sexuality that also takes into account the risks of particular sexual behaviours along the continuum of sexual exploration.

Evidently adolescents of all ages need comprehensive sex education and access to sexual and reproductive health services. Comprehensive sexual health interventions would include attention to various expressions of one's emerging sexuality including orientation, a continuum of sexual behaviour, emotional, psychosocial, and physical aspects of sex and sexuality, and types of sexual partners. In addition to basic reproductive health knowledge and safe sex messaging typical of many sex education interventions, it is essential to help adolescents understand their own sexuality, develop sexual decision-making and negotiation skills as well as give them opportunities to discuss and challenge expectations and assumptions about sex and sexuality. Given that risk behaviours in adolescents often cluster together (Chapter 5; Flisher et al., 2000; Liang, Flisher, & Lombard, 2007; Pluddemann, Flisher, Mathews, Carney, & Lombard, 2008), intervention programmes should attempt to address these and other risk factors including substance use, older partners, transactional sex, peer pressure, and interpersonal violence. Further, interventions with influential networks around adolescents such as

parents, teachers, healthcare professionals, and social services providers may help to counteract the vulnerabilities that increase the likelihood of sexual risk taking (Brook, Morojele, Zhang, & Brook, 2006; Flisher et al., 2000; Liang et al., 2007; Mathews et al., 2009; Pluddemann et al., 2008).

Other areas for intervention development

The discussion here has focused primarily on interventions that engage adolescents to promote healthy outcomes and prevent adverse experiences and outcomes. However, service providers who regularly work with adolescents such as educators, healthcare professionals, and youth service workers should all develop an understanding of adolescents' intimate relationships so that they can support teens in building positive dating relationships and avoiding or ending abusive or risky ones. Further, interventions are needed at the service and policy levels to ensure that they are adolescent-friendly, support healthy outcomes, and are relevant within teens' lived experiences of their relationships. South Africa's Child Care Act (38 of 2005) and Choice on Termination of Pregnancy Act (92 of 1996) as well as efforts to establish youth clinics appear to take a developmental perspective on adolescent sexuality in particular. However, continued reports of teenage pregnancy and sexually transmitted infections (Department of Health, 2006; Jewkes et al., 2001; Wand & Ramjee, 2012) suggest that the implementation of these policies and services may not be reaching the teens who most need them. Further, integrating intimate partner violence prevention and relationship education into sexual and reproductive health services in the public health, NGO, and advocacy sectors may help to deliver a more comprehensive service and create environments that support healthier outcomes. As noted earlier, it is important that interventions recognise the complexities of teenagers' lives, relationships, and environments including school, homes, and communities (Fantasia & Fontenot, 2011).

This thesis contributes to existing theoretical models of intimate partner violence by expounding on how adolescents' conceptualisations and constructions of dating relationships may lead to vulnerabilities to such abuse. For example, the high social value of these relationships and peer pressure to engage in them (Chapter 3) within a context where violence is largely accepted, may increase the risk of abuse

within the relationship to the extent that it may not feature in adolescents' assessment of their relationships (Chapter 4). The highly gendered nature of early relationship ideas and practices among adolescents also increases their vulnerability to intimate partner violence (Chapter 3). Further, the typicality of multiple concurrent dating partnerships in addition to most adolescents' negative views of this practice contribute to risks of dating violence (Chapter 3). Theoretical models of intimate partner violence should consider the influence of social models of intimate relationships and love. The notions of ideal dating relationships may increase vulnerabilities or protection against abuse within them. Overall, the lack of healthy, adolescent romantic relationship models leaves teenagers to base their conceptualisations on peer lore and adult relationship models portrayed in their communities and the media. These models can be inappropriate for adolescence when individuals are only beginning to experience such relationships and also increase their vulnerabilities to abuse including sexual coercion, physical violence, and emotional abuse.

Limitations

The limitations to each sub-study included this thesis have been discussed in each respective chapter (Chapters 3, 4, 5); however, some overall limitations bear consideration here. Each chapter discusses a study based on different samples of adolescents – two in urban centres of the Western Cape (Chapters 3 and 5) and one in a primarily rural setting of the Eastern Cape (Chapter 4). The relatively small sample sizes from concentrated geographical areas in the country limit the generalizability of these findings to adolescents across South Africa and more broadly to other similar LMIC and post-conflict contexts. Therefore, the central research questions of this thesis to build an understanding the nature of contemporary adolescents' intimate relationships is constrained by the specific population groups in the study samples. It would be useful to replicate and further these studies with other groups of adolescents around the country. Given that several of the findings presented in this thesis are very similar to findings from previous work conducted with teenagers in other parts of South Africa (e.g., Campbell & MacPhail, 2002; Harrison et al., 2001; Harrison et al., 2001; MacPhail & Campbell, 2001), it is unlikely that studies replicating those conducted for this thesis will have very different

findings. Nevertheless, the findings address gaps in the current body of research literature by adding knowledge about adolescents' intimate relationships from a different population (South Africa) compared to the majority of the work that has been conducted in North America.

Due to having three separate datasets, investigations of links between concepts studied in each project were not possible in this thesis. Nevertheless, there was congruence in the findings and these have been discussed in this chapter. The similarities with other local research have also been discussed throughout the thesis.

Although this thesis has emphasised the implications of the findings for intervention development, none of the studies attempted to implement and evaluate these recommendations as it was outside the scope of this thesis. Therefore, I cannot conclude whether these suggestions will be feasible and effective in changing adolescents' intimate relationships to prevent adverse outcomes and promote healthy and enjoyable relationships.

Future Directions

Additional research questions arose out of the reflection of the findings and the limitations of the thesis. Most notably, there is a need for research into how to translate the recommendations in this thesis into intervention practice and then to evaluate the effectiveness of them. This translation may be difficult and requires ongoing consultation with key informant adolescents. Indeed, these consultations with teens from across the developmental spectrum will also help to give insight into other unanswered questions about the nature of intimate relationships at different developmental stages.

In depth interviews with and observations of younger and older adolescents may help to reveal more about the development of these relationships over time. Such an understanding will contribute to building developmentally sensitive models of adolescents' intimate relationships which will additionally help intervention developers to design program material and activities that are relevant to teens' experiences.

To further contribute to a developmentally sensitive understanding of adolescent romantic relationships, researchers should consider stratifying their sample and analysis by developmental sub-groups (e.g., age or school grade groups). This stratification will allow further comparisons of younger and older adolescents' ideas and behaviours in dating and sexual relationships. This nuanced knowledge will help to inform developmentally responsive interventions.

A better understanding of adolescent sexual behaviour and specifically investigation of whether there is a patterned progression of these behaviours is needed. In addition, studies should investigate what individual, relationship, and sociocultural factors influence adolescents' progressions through various sexual behaviours. This information would enhance comprehensive sexual education interventions particularly with the aim of promoting safe sex practices and delaying coital debut.

Conclusions

This thesis explored the nature of contemporary South African adolescents' intimate relationships and then considered the implications of this for the development of relevant and engaging public health interventions to prevent adverse experiences in, and outcomes of, these relationships and promote healthy dating relationships. This advances our understandings of teens' romantic relationships.

The thesis indicates that many older and younger South African teens engage in very fluid, informal dating relationships and several also engage in various sexual behaviours both with dating and casual partners. This insight into the micro-dynamics of local adolescents' romantic relationships is a new contribution to the field that is dominated by North American dating scripts. These micro-dynamics are especially important to consider in terms of the risk and protective factors they introduce in the adolescent dating landscape; for example, open communication, regular contact, and collaborative decision-making are particular areas of vulnerability within teens' intimate relationships. This points to a need to build specific relationship skills among adolescents, but also provides a greater

awareness of the complexity the relationship context within which such skills are to be implemented.

To date, few local or international researchers have investigated what factors contribute to adolescents' positive relationship assessments. This thesis identified these factors among a group of older teenage girls and boys. What is notable about the specific factors – mutual main relationship, boyfriend education, and open sexual and reproductive health communication for girls and mutual main relationship and no quarrelling for boys – associated with adolescents' relationship assessments is that some of them may increase their vulnerability to intimate partner violence and HIV. It was also surprising to find that partner violence, relationship equity, and relationship conflict did not play a significant role in adolescents' assessments. The latter indicates a need to engage adolescents in a critical reflection of their relationship conceptualisations and values.

Adolescent sexual behaviour is particularly topical in South Africa currently because of controversial sections in the Sexual Offences Act (Republic of South Africa, 2007) that criminalise consensual sexual activity between similar-aged teenagers who are between the ages of 12 and 16 years old. Yet, little is known about the extent to which young teenagers under the age of 16 years engage in a variety of sexual behaviours ranging from kissing to intercourse. This thesis found that discussions about sex were a major theme in younger and older adolescents' views of intimate relationships. The prevalence of younger teens' engagement in sexual behaviours reported in this thesis indicated that kissing and petting were more common than oral, vaginal, or anal intercourse. However, several young girls and boys had experience in penetrative sex and other risky sexual behaviour including having sex under the influence of alcohol or drugs, not using contraceptives, and having sex with casual partners. These findings suggest a need for comprehensive sexual education that will help young teenagers develop sexual decision-making and negotiation skills that will help them to explore their sexuality in developmentally appropriate and safe ways.

Although the introduction to this thesis notes the particular need for intimate partner violence prevention interventions for adolescents, I suggest that teenagers need broader romantic relationship interventions that address several vulnerabilities and builds skills that help them to create and maintain healthy, enjoyable dating relationships. Specifically, gender constructions and inequities, sexual behaviour and decision-making, substance use, open communication and negotiation skills, peer culture, reliance on assumptions, critical reflection of personal and group concepts and norms, intimate partner violence, and the construction of relationships are all important themes. There is also a tension between encouraging developmentally appropriate relationships for different age groups and also preparing them for relationships later in adolescence and adulthood when some practices that are appropriate in early stages are no longer appropriate and may be risky (e.g., multiple concurrent partners, casual relationships). The understanding of the complexities of the teen dating landscape urges intervention developers to ensure that programme material and key skills are feasible within the kinds of relationships that adolescents engage in; therefore, dialogue and skills practice are essential activities in an intervention in order to promote the application of intervention ideals in teenagers' daily lives. Intervention development is not a static procedure, but rather an on-going process that should be informed by continuous qualitative and quantitative evidence of adolescents' conceptualisations and constructions of intimate relationships.

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